SEN OROUGH URBAN DISTRICT COUNCIL

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

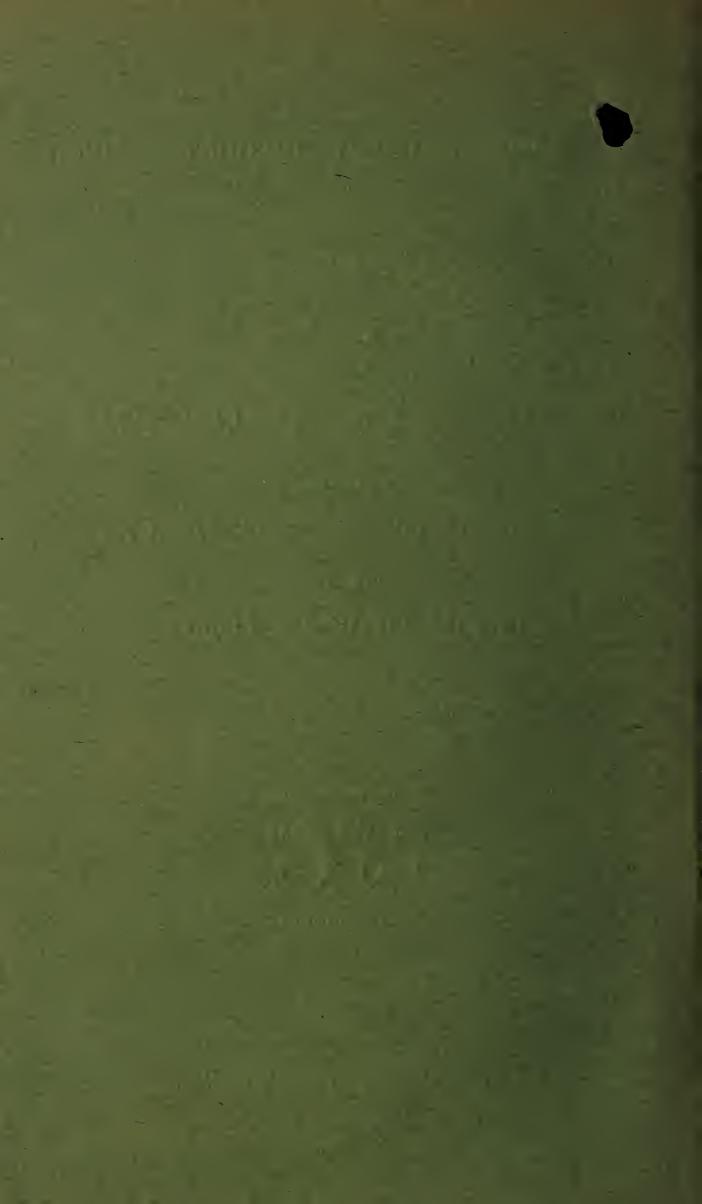
AND THE

SCHOOL MEDICAL OFFICER

For the Year

1932

E. S. Sugden, Northgate & Cheapside, Cleckheaton.



SPENBOROUGH URBAN DISTRICT COUNCIL



REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND THE

SCHOOL MEDICAL OFFICER

For the Year 1 9 3 2



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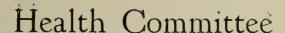
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NORTH BIERLEY

Councillors J. J. Brooke, Hardman and Stott (ex-officio)

OAKWELL

Councillors Heywood and Sutton

Staff of Health Department

LAWRENCE PICKERING-PICK, D.P.H.,

Medical Officer of Health,

Medical Officer to Child Welfare Centre,

Medical Superintendent to Liversedge and

Mirfield Joint Hospital Board.

W. R. E. Unthank, M.D., F.R.C.S., D.P.H.,
Deputy Medical Officer of Health.

*CLARA MURRAY WILSON, M.B., CH.M.

‡F. W. MARSDEN, C.R.S.I. - - Chief Sanitary Inspector

‡G. J. Woodhouse, c.r.s.i. - - Assistant Sanitary Inspector

‡R. Clarkson, c.r.s.i. - - Assistant Sanitary Inspector

*Miss E. M. Firth, c.m.B. - - Health Visitor

*Miss P. Holmes, C.M.B. - - Health Visitor

*Miss E. M. McLeod, C.M.B. - Health Visitor

*Miss F. Williams, C.M.B. - - Health Visitor

Miss M. Furness - - - Clerk

^{*} Part Time.

[‡] Hold Meat Inspection Certificate of Royal Sanitary Institute.

SPENBOROUGH URBAN DISTRICT COUNCIL

ANNUAL REPORT

OF THE

Medical Officer of Health, 1932

To the Chairman and Members of the Health Committee.

Gentlemen-

I have the honour to present to you my Thirteenth Annual Report of the Sanitary Conditions of the Urban District of Spenborough for the year 1932.

This report will be an ordinary report, and will refer mainly to matters connected with the year 1932 only.

I desire to express my thanks to Mr. F. W. Marsden, Chief Sanitary Inspector, for his assistance in drawing up certain portions of this report.

I am, Gentlemen,

Your obedient servant,

LAWRENCE PICKERING-PICK.

VITAL STATISTICS.



The following are some of the more important statistical details, most of which will be dealt with more fully later in the report:

Area—Cleckheaton, 1,756 acres; Liversedge, 2,136 acres; Gomersal, 1,100 acres.

Total area of the Urban District of Spenborough, 4,992 acres.

Population—Census 1931, 30,962; estimated middle of 1931, 31,250; estimate for 1932 not received.

Number of inhabited houses in 1921, 7,873.

Number of inhabited houses (end of 1932), 8,737 (from rate books).

Number of families (Census 1921), 7,962.

Rateable value 1931-32, £126,315.

Sum produced by a penny rate, £484.

Live Births.—Legitimate, total 379; males 209; females, 170. Illegitimate, total 10; males 5; females, 5. Still Births—19; rate per 1000 total births, 50'1. Birth rate 12'1 per 1000. Deaths, 397. Death rate, 12'7.

Percentage of total deaths occurring in Public Institutions, 20'9.

Number of women dying in, or as a result of child-birth: from sepsis, nil; from other causes, one.

Death rate of infants under one year of age per 1,000 live births.—Legitimate, 73'2; Illegitimate, nil; total 71'2.

Deaths from Measles (all ages), 1; Whooping Cough (all ages), 6; Diarrhæa (under two years of age), 1.

POPULATION.

The preliminary report of the Census taken in April, 1931, gives the population of the Urban District of Spenborough as 30,962, or 155 less than in 1921. A communication has since been received giving the estimated population in the middle of 1931 as 31,250, and this figure will be used throughout this report in calculating rates. The estimated population for the middle of 1932 had not been received when this report was written.

CENSUS, 1931.

Population, 30,963; Males, 14,483; Females, 16,480. Population in 1921, 31,117.

Distribution of sexes: 1138 females to 1,000 males, compared with 1,147 in 1921. In England and Wales 1087 females to 1,000 males.

			MALES		FEMALES
Single	• • •	• • •	6650	• • •	7798
Married	• • •	• • •	7207	• • •	7231
Widowed	• • •	• • •	616	• • •	1447
Divorced		• • •	10	•••	4
AVERAGE AGE			1931		1921
Males	• • •	• • •	33.2	• • •	30.4
Females	• • •	• • •	34.8		31.75
All Perso	ns	• • •	34.0	• • •	31.1

The average age of the population has increased by 9'3 per cent.

POPULATION IN AGE GROUPS.

Age		Males	Females	Age		Males	F	Females
0-4	• • •	955	986	45 - 49	• • •	994	• • •	1162
5 - 9		1148	1078	50—54	• • •	937	• • •	1090
10—14		1161	1146	55—59	• • •	847		969
15—19		1166	1324	60 - 64	• • •	654	• • •	723
20—24		1258	$\dots 1382$	65—69		444	• • •	611
25 - 29	• • •	1230	1390	70—74	• • •	300	• • •	393
30-34		1128	1368	7 5—79	• • •	138	• • •	225
35—39	• • •	1042	1293	80—84	• • •	46	• • •	100
40-44	• • •	1021	1207	85—89	• • •	14	• • •	28
				90-94	• • •		• • •	5

PERCENTAGE OF POPULATION IN AGE GROUPS.

AGE	\mathbf{M}_{2}	ALES		FEM	IALES		ALL P	ERSONS
	1931	1921		1931	1921		1931	1921
0-4	6.59	8.52		5.98	6 97		6.27	7.7
5—14	15.94	17.48	• • •	13.5	15.53	• • •	14.64	16.44
15—24	16.74	17.48	• • •	16.42	18.66	• • •	16.57	18.11
25—44	30.53	30.65		31.91	31.14		31.26	30.92
$45 - 64 \dots$	23.7	21.04	• • •	23.93	21.29		23.82	21.14
65 & over	6.5	4.83		8.26	6.41	• • •	7.44	5.69

With a population smaller by only 154 than in 1921 there were 1433 fewer persons of under 20 years of age and 738 more persons of 60 and over. There were 4080 children of legal school age (5-14) or 13'2% of the total.

In 1931, 28'95 per cent. of the population was under twenty and 11'89 per cent. were sixty or over compared with 33'41 per cent. and 9'46 per cent. respectively in 1921.

The proportion of the population under twenty has decreased by 13'3 per cent. and that over sixty has increased by 25'7 per cent.

The following figures show the division of the population and other particulars in the several Wards.

	Area	Pop. in	Pop	ulation in	1931	Density
Ward	acres	1921	Total	Males	Females	per acre
Cleckheaton Ea	ıst 239	4965	4545	2098	2447	19.0
Cleckheaton W	est 234	3678	3881	1778	2103	16.6
Oakenshaw	. 444	658	642	280	362	1.4
Scholes	. 809	2506	2455	1175	1280	3.0
Spen & Littleto	wn 534	3993	4332	2015	2317	8.1
Millbridge	. 158	4282	3718	1725	1993	23.5
Hightown	. 752	3691	3356	1578	1778	4.5
Roberttown &						
Norristhorp	e 906	3850	3875	1885	1990	$4\cdot3$
Gomersal	. 916	3494	4159	1949	2210	4.5

It will be seen that the populations of the West Ward, Gomersal, and Spen & Littletown have increased while those of Scholes, East Ward, Millbridge, and Hightown have decreased. Roberttown & Norristhorpe and Oakenshaw are substantially the same.

Housing.

There were in the district 8,852 private families, giving a total of 30,793 persons. The remaining 170 persons included 82 in hotels and boarding houses, 36 in hospitals, and 52 others. These families occupied 8,817 structurally separate dwellings, with a total of 29,581 rooms which allows 1'04 persons per room.

The following table indicates the number of families occupying houses with varying number of rooms.

No.	in										
perso	ons				RO	OMS.					Total
in 💢	iily	1	2	3	4	5	6-7	8-9	10- u	р	Families
1	• • •	72	275	150	55	19	3	1	_	• • •	575
2	• • •	5 5	724	791	389	202	48	11	5	• • •	2225
3	•••	36	581	907	448	251	78	25	6	• • •	2332
4	• • •	15	398	608	349	245	81	19	10	• • •	1725
5	• • •	7	197	329	237	150	58	22	7	• • •	1007
6	• • •		111	164	124	70	27	14	6	• • •	516
7	• • •	1	45	81	63	33	14	6	8	• • •	251
8	• • •	1	11	32	24	26	6	2	3	• • •	105
9	• • •	/ 1	7	21	13	10	3	1	2		58
10	• • •	_	7.	11	8	3	3	1		• • •	33
11	• • •	—	3	2	2	2	2	1	1	• • •	13
12			1	4	2	1	1	—		• • •	10
13	• • •	—	_		1			—		• • •	. 1
14	• • •				—		—		—	• • 5	
15		_				1		_	_		1

as follows: Ward Families Dwellings Rooms per room

The families are divided amongst the various Wards

Cleckheaton	East	1309	1305	4236	1.07
Cleckheaton	West	1091	1090	4050	.95
Oakenshaw	•••	172	172	696	.98
Scholes	•••	727	727	2344	1.04
Spen & Little	town	1233	1227	.4167	.96
Millbridge	•••	1084	1082	3377	1.1
Hightown		965	962	3025	1.11
Roberttown &	Norristhorpe	1057	1052	3447	1.11
Gomersal	•••	1214	1200	4239	98

Of the 8,817 occupied dwellings accommodating 8,852 families, 8,784 housed one family only; 31 housed two families and in 2 there were three families. That is '4 per cent. of the houses contained more than one family, compared with 4.7 per cent. for the whole country.

Of the 31 houses with two families in each, one had two rooms, eight had three rooms, seven had four rooms, eight had five rooms and seven had six or more rooms. Of the houses with three families one had six to eight rooms and one nine or more.

The total number of occupied rooms was 29,581, giving an average of 3.36 rooms per house compared with 4.2 for the whole of the West Riding, and the number of persons occupying these rooms was 30,793, giving a density of 1'04 persons per room, compared with '88 per room in the West Riding and '91 in England and Wales.

The greatest density of room population was in Rottown and Norristhorpe and Hightown Wards where it was 1'11 persons per room and least in the West Ward and Spen and Littletown where it was '95 and '96 respectively.

The houses with most accommodation are in Oakenshaw where there is an average of 4.05 rooms per house, while the houses in Millbridge have least accommodation only averaging 3.11 rooms per house.

The general density of population is greatest in the Millbridge Ward with 23'5 persons to the acre, and in the East Ward with 19 to the acre. It is least in Oakenshaw with 1'4 and Scholes with 3 persons to the acre.

The density of houses in the various Wards are shown by the following table:

		H	louses per Acre
Millbridge	•••	• • •	6*85
Cleckheaton East	• • •	• • •	5 °46
Cleckheaton West	• • •	• • •	4.66
Spen and Littletown	• • •	• • •	2.3
Gomersal	• • •	• • •	1'31
Hightown	• • •	• • •	1.28
Roberttown and Norris	sthorpe	• • •	1.16
Scholes	• • •	• • •	' 9
Oakenshaw	•••	• • •	. 39

Of the 8,852 families, 188 occupy houses with one room only, 2,360 live in houses with two rooms, 3.100 have houses with three rooms, 1,716 have four-roomed houses, there are five rooms in 1,013 of the houses. 324 families occupy houses with six or seven rooms and 103 have houses with eight or nine rooms while the remaining 48 families occupy houses with ten or more rooms.

Thus 5,648 families occupy houses with three rooms or less and 475 have houses with six or more rooms, that is 63'8 and 5'3 per cent. respectively. In the whole of the West Riding only 30'1 per cent. of the houses have three rooms or less.

The room density of population in these houses with three rooms or less is 1'29 persons per room compared with 1'04 for all houses in the district, an excess of 24%.

Overcrowding.

289 families (3'3% of the total) comprising 1,907 individuals (6'1% of the total) are living at a density of three or more persons to the room. 58 families of 433 persons live in houses with four or more persons to the room; 21 families with 174 persons live at a density of five to the room; and four families comprising 36 individuals have only one-sixth of a room a piece.

Occupational details are not yet available and it is hoped that these matters will be dealt with in my next report, together with comparison of age groups with those in the West Riding and England and Wales.

VITAL STATISTICS.

BIRTHS.

During 1932 three hundred and twenty-one births were registered in the district, of which 181 were males and 140 females.

The net births for the district were 379, namely 209 males and 170 females, a decrease of 17 compared with 1931 and a decrease of 10'8 per cent. on the average for the past five years.

The birth rate was 12'1 per 1,000 living, '6 per 1,000 less than in 1931.

There were 10 illegitimate births, one less than in the previous year, giving a rate of 26'4 per 1,000 births. Of these, five were boys and five girls.

The rate of 12'1 births per 1,000 of population is 3'2 per 1,000 less than that for England and Wales, and 3'3 per 1,000 less than that of the 150 smaller towns of which Spenborough is one.

Table I shows the Wards in which children whose births were registered in the district were born.

TABLE I.		,	61.
		Male	Female
Roberttown and Norristhorpe	•••	25	23
Cleckheaton East · · ·	• • •	18	25
Cleckheaton West	• • •	39	23
Gomersal	• • •	26	16
Hightown	• • •	13	14
Millbridge	• • •	21	14
Oakenshaw	• • •	2	
Scholes	• • •	15	11
Spen and Littletown	• • •	22	14

DEATHS.

The number of deaths registered in the district during the year was 308. From these must be deducted seven deaths of persons resident outside the district and dying in institutions within the district, and to them must be added ninety-six deaths of residents in the district who died in institutions outside its borders.

This gives the number of net deaths as 397; equal to a rate of 12'7 per 1,000 living, as compared with 14'1 in 1931 and an average of 13'1 for the five years 1927 to 1931.

Five deaths occurred from influenza compared with sixteen in 1931.

One hundred and twenty deaths occurred from disease of the heart and blood vessels, and forty-five from disease of the respiratory system (excluding tuberculosis), while fifty-two persons died of apoplexy or degeneration of the brain.

The mortality rate from malignant disease (cancer) was 1'3 per 1000, there having been forty-one deaths from this disease, one-third less than in the previous year.

61'2 per cent. of the total deaths occurred from the above diseases, a rather smaller proportion than last year.

No death occurred from Small Pox, and none from Enteric Fever.

DEATHS FROM ZYMOTIC DISEASES.

Eight deaths occurred during the year from the seven chief Zymotic Diseases. Six were from Whooping Cough and one each from Diarrhæa and Measles.

INQUESTS.

During 1932, thirty-nine deaths were the subject of Coroner's Inquests, or were certified by the Coroner without Inquest. This represented 9'8 per cent. of the total deaths, a much larger proportion than in the previous year.

The ages at which these persons died were :-

Under 1 year		• • •	• • •	1
5—15 years	•••	• • •	• • •	4
15—25 years	• • •	• • •	•••	3
25—45 years	•••	• • •	• • •	5
45—65 ye ars	• • •	• • •	• • •	15
Over 65 years	· · ·		• • •	11

The causes of death were as follows:-

Suicide——Cut Throat	• • •	1	
Poison	• • •	2	
Drowning	• • •	3	
Coal Gas	• • •	2	
On Railway	• • •	1	
Accident —Motor Vehicles		7	
Burns and Scald	S···	3	
Fall	• • •	1	
Deaths by Violence	• • •		20
Diseases of Circulatory Sys	stem	• • •	15
Status Lymphalicus	• • •	• • •	1
Bronchitis	• • •	• • •	1
Operation for Appendicitis	• • •	• • •	1
Choked by food	•••	• • •	1

Total Inquests ... 39

Table II.



CAUSES OF, AND AGES AT DEATH, DURING THE YEAR, 1932.

			esid	ents	whet		occui	ned a ring rict.			•	Gen	istrar eral's urns
Causes of Death	All Ages	Under 1 year	l and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	Over 65 years	Males	Females	Deaths in Institutions	Males	Females
Measles	1 6 5 1 9 6	1 1 1	5	1	3 1	4	2 2 1	3	2 1 4 5	1 6 3 5 1	1 1 5 5	2 1 4 6	1 6 3 5 1
Locomoter Ataxy Cancer Diabetes Cerebral Hæmorrhage Heart Disease Other Circulatory Diseases Bronchitis Pneumonia Other Respiratory Diseases Peptic Ulcer	1 41 5 42 102 18 18 23 4 3 1	1 1 7	4	2	2	4 3 3 1 3	1 20 4 13 31 3 4 6 1 3	17 1 26 63 15 12 3	1 17 1 15 48 12 8 8 3	24 4 27 54 6 10 15 1	7 2 6 15 3 2 4	1 17 2 14 48 12 8 8 3	24 4 28 54 6 11 15 1
Diarrhœa (under 2 yrs.) Appendicitis Diseases of Liver Other Digestive Diseases Acute and Chronic Nephritis. Non-Septic Puerperal Causes. Congenital Debility	3 6 5 11	9		1	1	3 1 1	1 2 1 3	4 1 7	1 4 1 4	2 4 7 1 2	2 1 2	1 1 4 2 4 7	2 2 4 7 1 2
Senility Suicide Other Deaths from Violence Other Defined Diseases Ill-defined Causes	19 9 11 35 2	3 1		3	2	2 1 3	4 2 11	19 3 18 1	4 6 5 16 1	15 6 19 1	3 1 8 12 1	4 6 5 15 1	2 15 3 6 16 1
Totals	397	27	11	7	10	29	115	198	175	222	83	176	221

VITAL STATISTICS OF THE WHOLE DISTRICT FOR 1927-32. Table III.

e district.	Number. At all ages. Rate.		14.78	11.8	14.6	10.2	14.1	12.7
ging to the			451	360	451	313	440	397
Net Deaths belonging to the district.	Under one year.	Rate per 1000 Births.	20.92	2.09	2.62	9.25	2.82	71.2
Net Deal	Under o	Number.	23	22	35	18	31	27
	register	Tansferred I ton establisa Not sinsbies Not sinsbies of the sins o	111	96	100	69	101	96
ło bə	register	Tansterable Transters To Month of the Month	Ŋ	∞	2	∞	∞	7
Deathe) ()	Rate.	11.3	6. 8	9. 11	8.3	11.1	6.6
Total De	registered distric	Number.	347	272	358	257	347	308
	ths.	Rate,	14.22	14.3	14.3	13.4	12.7	12.1
Number.		Number.	434	438	442	413	396	379
. 01	imated ch year	Population est	30510	30510	30750	30780	31250	31250
	•	XEVE	1927	1928	1929	1930	1931	1932

Area of District in acres (Land and Inland Water)

Total Population at all ages (Census 1921)

Estimated Population by Registrar General

Number of Inhabited Houses by Registrar General ...

Table IV.—BIRTH RATE, DEATH RATE and ANALYSIS OF MORTALITY during the year 1932.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1932, but those for the towns have been calculated on populations estimated to the middle of 1931. The mortality rates for England and Wales refer to the whole population, but for London and the towns to civilians only).

	Bij Rŝ	Birth Rate	A	ANNUAL DEATH RATE per	, DEAT	тн Ка	TE per	1,000	Popu	Population	.:	Rate p Live	Rate per 1000 Live Births.		Percen Total	Percentage of Total Deaths.	İ
	per 1,000 Total Popula tion.	per 1,000 Total Popula- tion.	Il Causes.	phoid and stra-typhoid Fevers.	Small-pox.	Measles.	arlet Fever	Vhooping Cough.	iphtheria.	nfluenza,	Violence,	arrhæa and eritis under wo years.	otal Deaths nder One year.	ertified by Registered Medical actitioners.	nest Cases.	ertified by Proner after P.M. O Inquest.	ncertified see of death
	Live	Still	ΙΨ	(T)	5		os	Λ	D	I	\ \	Ent	oT	Я		оЭ	
England and Wales	15.3	99.0	12.0	0.01	00.0	80.0	0.01	20.0	90.0	0.32	0.53	9.9	65	91.1	2.9	1.8	6.0
and Great Towns including London 126 Smaller Towns (Estimated Resident	15.4	02.0	11.8	0.00	00.0	0.11	0.01	0.08	20.0	0.28	0.48	6.8	69	91.3	5.6	2.3	0.2
Populations, 20,000 to 50,000 at 1931 C).	15.4	69.0	10.8	00.0	ı	90.0	0.01	90.0	0.03	0.31	0.42	4.5	58	91.9	2.8	1.3	1.0
London	14.2	0.21	12.3	00.0	00.0	0.19	0.0	80.0	20.0	22.0	0.53	12.6	99	89.4	6.5	4.4	0.0
Spenborough	12.1	65.0	12.7	00.0	00.0	0.03	00.0	0.19	00.0	0.16	0.64	5.6	71	2.68	8.6	0.0	9.0
												Puerperal	eral Se	Sepsis. Oth	Others.	2	1

Total Births Total Births per 1,000 Live Births The maternal mortality rates for England and Wales are as follows: | per 1,000 Live Births : • : For Spenborough ...

4.06 2.64 2.51

2.63 2.52 2.64 2.51

1.61

Table II shows the causes of and ages at death for the year 1932. It will be seen that there is a slight difference between the figures supplied by the Registrar General, and these obtained from the local registrars and transferable deaths, but this is not enough to effect the rate materially.

There was a decrease in the number of deaths during the year under review compared with that for the previous twelve months. This decrease amounted to 9'8 per cent. and the total number of deaths was six less than the average for the preceding five years.

The decrease affected males almost entirely. Three more females died during the year than in 1931, but the number of male deaths showed a decrease of forty-six. Four fewer persons died at the age of twenty-five or under and thirty-two fewer at sixty-five or over. The decrease was thus fairly well distributed over all the age groups.

Heart disease was as usual the commonest cause of death, the proportion being even higher than in 1931. In that year 20'4 per cent. of the deaths were due to Heart disease while in 1932 the proportion has risen to 25'6. All but eight of the one hundred and two deaths from this group of causes occurred in people of over forty-five years. Other diseases of the Circulatory System accounted for eighteen deaths, eight fewer than in the previous year, and forty-two died of Apoplexy, six more than in 1931. This group of diseases accounted for no less than 40'8 of the total deaths, 6'3 per cent. more than in the year previous.

Deaths from Influenza showed a considerable decline only five persons having died from this cause compared with sixteen the year before, and there was a very marked decline in the number of deaths from Bronchitis, Pneumonia and other Respiratory diseases. Forty-five persons died from these causes compared with seventy-four in 1931. Influenza and Respiratory diseases caused 20'4 per cent. of the deaths in 1931 and 12'4 per cent. in 1932.

Deaths from Tuberculosis showed a decrease of one, there being four fewer cases of death from the respiratory form of the disease and three more from other forms.

No death occurred from Puerperal Sepsis, a matter of considerable satisfaction. There has only been one death in Spenborough from this cause in the last three years.

The only death during the year connected with child-birth was actually due to Pneumonia.

The deaths from Malignant diseases numbered fortone compared with sixty in 1931. This is three fewer than the average for the previous twelve years and six fewer than that for the preceding six years.

There was a very large number of deaths from Violence, viz., twenty. Of these nine were cases of Suicide compared with an average of 3'25 during the previous twelve years and eleven from Accident compared with an average of 9'0 during the same period. Of these eleven accident cases, motor vehicles were involved in seven. In all, five per cent. of the total deaths were due to Violence.

The death rate of 12'7 per 1,000 is slightly higher than that for the whole country which is 12'0 per 1,000, but it again compares badly with that for the Smaller Towns for which it is 10'8.

In 1932 the deaths exceeded the births by eighteen compared with forty-four in the previous year. During the six years 1927-32 the births have exceeded the deaths by ninety, or fifteen per annum on the average.

Table III gives the Births, Deaths and Infantile Mortality for the district in 1932 and the five preceding years, and Table IV a comparison of certain Vital Statistics for the whole country, 118 large towns, 126 smaller towns, London and Spenborough.

Table VII gives the main Vital Statistics for each quarter of the year.

INFANTILE MORTALITY.

The Infantile Mortality rate while showing an improvement in the very poor returns of 1931 is again unsatisfactory. Four fewer babies died than in the previous year and the rate fell from 78'3 per 1,000 to 71'2 per 1,000, but these figures compared with 50'2 in 1928 and 43'6 in 1930 are very disappointing.

The best quarter was the third, as is usually the case here, with only two deaths. Usually the first quarter is the most fatal for babies but this year most deaths occurred in the last quarter when there were ten. In the first and third quarters the infant deaths numbered eight and seven respectively. Prematurity accounted for seven deaths and

Congenital Debilty and Marasmus for three more. Seven babies died from Pneumonia, and the other twelve all died from different causes.

There was only one death from Diarrhæa, a very fatal disease in small babies that fortunately Spenborough has been comparatively free from for some years. The rate per 1,000 live births from this disease 2.6 in Spenborough, compared with 6.6 for England and Wales and 4.5 for the Small Towns.

The neo-natal deaths, that is those occurring in the first month showed a big decrease. In 1931, fifty-five per cent. of the infantile deaths occurred during this period while in 1932 only thirty per cent. took place during the first four weeks of life. While this is satisfactory so far as it goes, an increase of five deaths during the rest of the first year is disappointing as after the end of the first month babies should have got a stronger grasp on life and more able to resist disease.

INFANTILE MORTALITY. Causes of Death-Ages.

Table V. Cause of Death	Under 1 day	2 to 7 days	8 to 14 days	15 to 21 days	22 to 28 days	Up to 1 month	1 to 3 months	4 to 6 months	7 to 9 months	10 to 12 months	Up to 1 year
Prematurity Congenital Debility Cong. Heart Disease Pneumonia Measles Whooping Cough Castro-Enteritis Heart Failure Tuberculous Meningitis Status Lymphaticus Cerebro-Spinal Fever Pemphigus Foliaceus	2	2 1		1		1	1 2 1 1 1	2 2 1 1 1 1 1	2	1	7 3 1 7 1 1 1 1 1 1
Totals	3	3		2		8	6	8	4	1	27

Causes of Infantile Mortality in each Quarter.

Table \Cause of De			1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Prematurity Congenital Debility Cong. Heart Disease Pneumonia Bronchitis Measles Whooping Cough Gastro-Enteritis Heart Failure Tuberculous Meningitis Status Lymphaticus Cerebro-Spinal Fever Pemphigus Foliaceus			1 5	2 1 1 1	1	5 1 2 1
Totals	•••	•••	 8	7	2	10

QUARTERLY SUMMARY OF VITAL STATISTICS.

Table VII.			1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Births Registered in District Males Females *Rate per 1000 Living per annum		• • •	76 42 34 9·7	94 54 40 12.0	81 40 41 10.3	74 48 26 9·5
Deaths Registered in District Males Females Corrected Deaths	•••	•••	102 36 66 129	67 31 36 93	74 30 44 92	65 29 36 83
Corrected Death Rate Deaths under 1 year Rate per 1,000 Population Rate per 1,000 Births *Still Births	•••	• • •	16.5 8 1.0 105	11 [.] 9 7 .88 74 1	11.8 2 .24 25 1	10.6 10 1.28 135 3
Ages at Death—1 to 5 years 5 to 15 years 15 to 25 years 25 to 45 years	0010	• • •	3 2 6 9	3 1 2 9	2 0 0 7	3 3 2 4
45 to 65 years Over 65 years Deaths from Zymotic Diseases Rate per 1,000 of Population	•••	•••	34 67 0	29 42 4 ·13	30 51 3 ·1	22 39 1 .03

^{*} Not corrected for Births registered outside the District,



NURSING IN THE HOME.

No alterations have taken place during the year in tespect to Home Nursing and the arrangements in force, which are managed by Voluntary Associations, continue to be satisfactory.

MIDWIVES.

The same number of Midwives, namely five, have been habitually practising in the area as in the previous year. The personnel is the same, and no change has been made in the arrangements entered into some years ago with the subsidised Midwife.

LABORATORY FACILITIES.

Bacteriological Examinations are carried out at Wakefield, and any chemical analyses are carried out by Richardson & Juffe, Bradford. During 1932 two water samples were submitted for chemical analysis. No samples of food were sent as this work is carried out by the County. (see Water and Sale of Foodstuffs).

Twenty-three specimens of various kinds were sent to the County Laboratory at Wakefield for bacteriological examination. The following are details of specimens submitted:—

	Positive.	Negative.
Hair for Ringworm Spores	2	8
Swabs for Diphtheria	4	2
Sputum for Tubercle	6	0
Vidal Test for Enteric Fever	1	0

ACTS AND ORDERS IN FORCE.

The following Acts and Orders are in force in the District:—

- 1. The Baths and Wash-houses Acts, 1846 to 1899.
- 2. Infectious Disease Prevention Act, 1890.
- 3. The Public Health Acts Amendment Act, 1890. (Parts 2, 3 and 5).
- 4. The Private Street Works Act, 1892.
- 5. Notification of Births Act, 1907.
- 6. The Museums and Gymnasiums Act, 1891.

ACTS AND ORDERS-continued.



- 7. The Shops Acts, 1904-1920.
- 8. The North Bierley Joint Hospital Orders, 1888 to 1916:
- 9. Liversedge and Mirfield Joint Hospital Order, 1894-96, 1916.
- 10. Oakwell Joint Hospital Orders, 1896 to 1916.
- 11. The Cleckheaton Gas Act, 1869.
- 12. The Cleckheaton Local Board Act, 1870.
- 13. The Cleckheaton Gas Orders, 1888, 1909, 1913.
- 14. The Cleckheaton Electric Lighting Provisional Order, 1900.
- 15. The Cleckheaton Urban District Council Act, 1914.
- 16. Order under Gas (Standard of Calorific Powers) Act, 1916.
- 17. The County of the West Riding of Yorkshire (Spenborough Urban District) Confirmation Order, 1915.
- 18. The Public Health Acts Amendment Act, 1907, Sections 15 to 33 in Part II, Sections 34 to 38, 43 to 47, 49 to 51 in Part III; all Sections in Parts IV, V, VI, VIII and IX.
- 19. Rats and Mice (Destruction) Act, 1919.
- 20. Heckmondwike and Liversedge Gas Companies Acts.
- 21. Gomersal Gas Companies Acts.
- 22. Spenborough Urban District Council Gas Order, 1921.
- 23. Spenborough (Offensive Trades) Confirmation Order, 1922.
- 24. Spenborough Butcher's Shops Closing Order, 1924.
- 25. Public Health Act, 1925.
- 26. Public Libraries Acts, 1892 to 1919.
- 27. Infectious Diseases (Notification) Act, 1889, extended to Chicken Pox, by Order, 1929.
- 28. Cleckheaton and Liversedge Electric Lighting Orders (Amendment). Special Order, 1930.
- 29. Yorkshire (Woollen District) Transport Act, 1931.
- 30. Spenborough (Water Charges) Recision Order, 1932.

BYE-LAWS IN FORCE IN THE DISTRICT.

- 1. New Streets and Buildings, 1927.
- 2. Cemeteries, 1916.
- 3. Common Lodging Houses, 1916.
- 4. Public Baths, 1916.
- 5. Mortuary, 1916.
- 6. Public Wash-houses, 1916.
- 7. School Attendance, 1916.

E-LAWS—continued.

- 8. Employment of Children and Street Trading, 1920.
- 9. Market, 1916.
- 10. Houses let in Lodgings, 1916.
- 11. Nuisances, 1916.
- 12. Hackney Carriages, 1917.
- 13. Slaughter Houses, 1917.
- 14. Offensive Trades, 1923.
- 15. Pleasure Grounds, 1923.
- 16. Public Slaughter-House, 1926.
- 17. Smoke Abatement, 1928.
- 18. Wireless Apparatus, 1930.

HOSPITALS.

No alterations have taken place during the year in Hospitals, either in or serving the area. Full details of this service were given in my report for 1930.

Much use is made of the Voluntary Hospitals in the adjoining large towns. Over one-fifth of the total deaths allocated to the area occurred in Public Institutions, and though there appears to be no very great difficulty in obtaining beds for urgent cases, it seems as if there is a need for a small general Hospital in Spenborough.

SPECIAL DEPARTMENTS.

X-Ray work is carried out by the various hospitals serving the district.

There is a special Dental hospital in Leeds.

There is a special hospital for diseases of the Eye and Ear at Bradford, and also special departments for these cases at the general hospitals.

Massage.—The Ellison (Orthopædic Clinic) undertakes massage at the request of practitioners in the area.

The Registration of Nursing Homes Act (1927) is administered by the County Council.

There are two such Homes in the district, both privately owned. One is for general and Maternity cases and the other for Maternity cases only.

TABLE VIII.

The following Table gives the details of the cases admitted to the three Isolation Hospitals serving the District during 1932.

Remaining on Decen	iber 31 st	, 1932–	_				All
N	North Bie	erley.	Crossle	y.	Oakwell.	H	ospitals.
Scarlet Fever . Days in 1931. Days in 1932.	. 16	•••	2 75 22	•••	0 0 0	•••	4 91 121
Total Days .		• • •	97	• • •	0	•••	212
Diphtheria Days in 1931.		• • •	0	• • •	2 120	•••	2 120
Days in 1931. Days in 1932.		•••	0	•••	9	•••	9
Total Days .		•••	0	•••	129	• • •	129
Admitted and Discha	rged in 1	1932—					
	42	• • •	75	• • •	12		129
•	. 1761	• • •	2224	• • •	514	• • •	4499
*	3 49	• • •	0	•••	5 1 57	* * *	8 206
~		•••		• • •		• • •	
Enteric Fever . Days	$\frac{1}{1}$	•••	1 41	•••	1 45	•••	3 91
Remaining on Decen							
G 1	21	• • •	23	• • •	5	• • •	49
Days in 1932		•••	459	•••	75	•••	
Days in 1933. Total Days .		• • •	320 779	•••	145 220	•••	998 2069
-		•••		• • •		* #	
Diphtheria . Days in 1932 .		•••	0	•••	0	•••	1 39
Days in 1933.		•••	Ö	•••	Õ	•••	4
Total Days .	43	• • •	0	•••	0	• • •	43
Total Days, 1932 .	2490	• • •	2746	•••	800	• • •	6036
Scarlet Fever .	2397	•••	2705	• • •	589		5691
*	88	•••	0		166		254
Enteric Fever .	5	•••	41	• • •	45	• • •	91
Average stay in Ho	47.5		70.0		40.5		75.0
•	43.5		30.9	• • •	42.5	• • •	37.0
	45.3		31.0	• • •	43.2	• • •	37.3
<u>.</u>	23.0		41.0	• • •	40.9	•••	34.4
Enteric Fever .	5.0)	41.0		45.0	• • •	30.3

MATERNAL MORTALITY.

There were no deaths during the year under review from Puerperal Sepsis and only one in connection with child birth. This person actually died of Pneumonia contracted during the puerperium, but for classification has to be counted as a death in child berth.

1

Owing to the small number of births, even one death gives a large rate for Maternal Mortality which in 1932 was 2'64 per 1,000 live births and 2'51 per 1,000 for all births. During the past five years there have been six deaths in child birth, three from Sepsis and three from other causes, the maternal mortality rate being 2'8 per 1,000 births. This compares very favourably with the record for the quinquenium 1920 to 1924 when there were thirty-one maternal deaths (of which nineteen were from Sepsis) and the maternal mortality rate was 11'3. It is interesting to note in this respect that the Ante-Natal Centre was established in 1925.

Consideration was again given to the appointment of a Consultant who could be called in in cases of Puerperal Sepsis. It has been decided that such an appointment should be made and it is expected that the arrangements will be completed within a short time.

CLINICS AND TREATMENT CENTRES.

MATERNITY AND CHILD WELFARE CENTRES.

- 1. Valley Road, Liversedge. Open 1st, 3rd and 5th Tuesday afternoon.
- 2. Church Street, Cleckheaton. Open 2nd and 4th Tuesday afternoon.
- 3. Temperance Hall, Scholes. Open 2nd Thursday in the month, in the afternoon.
- 4. Ante-Natal Centre, Valley Road, Liversedge. Open every Wednesday afternoon.
- 5.*School Clinics, Valley Road, Liversedge.

 General. Wednesday afternoon.

 Opthalmic. Thursday afternoon.

 Throat and Nose. 1st and 3rd Monday afternoon.
- 6. Orthopædic Clinic. Ellison Clinic, Cleckheaton. (Voluntary)
- 7. Tuberculosis Dispensary. Public Buildings, Liversedge. Friday mornings, W.R.C.C.
- 8. Venereal Disease. At neighbouring Hospitals.
 - * Full details will be found in the report of the School Medical Officer.

MATERNITY AND CHILD WELFARE. NOTIFICATION OF BIRTHS ACT, 1907.

Three hundred and twenty-one births were registered in the district during the year, the net births being 379, the difference in the two figures being accounted for by the fact that children whose parents live in Spenborough were born in the Heckmondwike Maternity Home or other places outside the district.

Two hundred and eighty-six of the births registered in the district were notified within the statutory period of 36 hours and fifty-eight later. That is, eighty per cent. were notified within the proper period. Of the births notified by the doctors, twenty per cent. were late, and of those notified by midwives, thirteen per cent. were notified after the expiration of 36 hours.

The Births were notified as follows:—

	Within 36 hours.	Later.
By Doctors	145	37
By Midwives	141	21
By M.O.H. Heckmondwike	g g g	31
By M.O.H. other Districts	•••	19

Thirteen Still Births were notified.

Three hundred and eighty-six "First Month" visits were paid to newly-born babies, and 2,081 subsequent visits, making a total of 2,467 visits to children of under one year. The average number of visits paid to each child, deducting those who died before the age of one month, was seven, rather more than the previous year.

1,737 visits were paid to children of over one year and not yet attending school. Of these thirty-five were found to have some defect needing medical attention and were referred either to their own doctor or to the Child Welfare Centre.



METHODS OF FEEDING.

	New	Births.	2 mths.	4 mths.	7 mths.	1 yr.
Breast only	• • •	335	261	218	160	26
Breast and Cow's Mill	٠	8	16	24	9	4
Breast and Dried Milk		1	8	17	23	12
Breast and other Food	• • •	1	2	6	55	73
Cows Milk only		20	49	59	66	5
Dried Milk only		17	56	94	105	5 9
Milk and other Food	• • •		1	1	80	330
Condensed Milk		3	4	9	14	3
Patent Foods	• • •	1	15	15	31	16
Other Foods	• • •					155

CHILD WELFARE CENTRES.

It was decided during 1931 to hold a proportion of the Child Welfare Clinics in Cleckheaton. Attendances at the Centre at Valley Road, Liversedge entailed very long walks for parents living in the Northern part of the area. Premises have been acquired in the old St. John's Infants' School, and the Centre is open on the second and fourth Tuesday afternoons in each month, the Clinic being held at Liversedge on the remaining Tuesdays.

The following Table gives the details of each Centre, the number of times open, and the attendances of both babies and toddlers.

		AT	TENDANCES		Per
	<u> </u>				
	Sessions.	Babies.	Pre-School.	Total.	Session
Cleckheaton	 21	473	144	617	29.4
Liversedge	 27	923	216	1139	42°2
Scholes	 11	105	68	173	15.7
All Centres	 59	1501	428	1929	32.7

The total attendances at all Centres (1,929) was a slight decrease on the previous year, namely 6 per cent., but it was greater by rather over seven per cent. than the average for ten years. The attendance on the whole may therefore be considered satisfactory. The attendances were much more evenly distributed throughout the year than is usually the case, varying from 523 in the third quarter to 453 in the fourth, a difference of only seventy. In the previous year the attendances varied from 622 in the third quarter to 371 in the first. Twenty-two per cent. of the attendances were made by toddlers, a rather smaller proportion than in the previous year.

The attendances at the Centre held at Cleckhea have been rather disappointing. It was hoped that by holding Centres in Cleckheaton many would come who found the walk with a pram. to Liversedge too trying. This does not seem to have been the case to any extent. The Centre was opened during the last quarter of 1931 when there was an average attendance of thirty-two. During the corresponding period of 1932 the average attendance was only twenty-four, while that at Liversedge for the same three months was forty-one.

The slight decrease in attendances was evenly distributed between babies and pre-school children and is not altogether to be wondered at in view of the fact that the births in 1931 fell below four hundred for the first time since Spenborough came into existence.

Two-hundred and six babies of under one year attended the Centres for the first time during the year and ninety-seven others who had first attended in 1931 also came. In addition twenty-four children of over twelve months of age were brought for the first time, a total of three hundred and twenty-seven. These together with a further forty-four toddlers who had attended in previous years make a total of three hundred and seventy-one young children who attended the Centre more or less regularly during the year.

The net births for the year were three hundred and seventy-nine, of whom twenty-seven died during the first month. Of the remaining two hundred and fifty-two, two hundred and six attended the Centres, a percentage of 81.7. The 303 babies who attended the various Centres made 1,501 attendances or an average of about five each.

There were one hundred and seventy-three attendances at the Scholes Centre of which one hundred and five were babies of under one year. The average attendance per session was 15.7. Though these figures show a slight decrease on those for 1931, which was an exceptionally good year, they may be considered satisfactory.

HEALTH VISITING.

All babies are visited during the first month, and at least four subsequent visits are paid during the first year. In cases where it appears necessary extra visits are paid. In all 2,467 visits were paid to babies of under one year, which gives, after deducting the twenty-seven who died during the first month, an average of nearly seven visits per child.

After a child reaches the age of one year these visits still continued, though at considerably longer intervals until the child goes to school, usually during his fifth year, though many are sent immediately on reaching their third birthday. One thousand seven hundred and thirty-seven visits were paid to these children during the year. The Child Welfare Centre is open to these older children, and, in my opinion, the arrangements in force are quite adequate to deal with their needs.

CHILDREN'S ACT.—Part I.

Immediately information is received of a child who comes under this Act, the house is visited, particulars are obtained of the foster parents, number of inmates, evidences of overcrowding, and of the general sanitary conditions of the premises. There are but few of these children in Spenborough, only six having come to my notice since the duties under the Act were transferred to Local Authorities. In no case has there been any fault to find with the conditions under which these children were living.

ORTHOPÆDIC WORK.

Great help is given to the Centre by the Spenborough Cripples' League which is held at the Ellison Clinic, Cleckheaton. This is a Society managed by a voluntary committee and under the care of Mr. James Phillips, of Bradford. Cases showing bone deformities due to rickets are sent to the Ellison Clinic for treatment with most excellent results. Ten of such cases were sent during the year.

There are no special arrangements in the district for dealing with unmarried mothers and illegitimate infants, but they are invited to come to the Centre where special supervision is exercised.

I have again to place on record my appreciation and thanks for the work done by the Ladies' Voluntary Committee in connection with the work of the Child Welfare Centre. Their work has contributed largely to the success of the Centre. Members of the Committee attend each time the Centre is open both at Valley Road and Scholes.

SUPPLY OF DRIED MILK.

Dried Milk is supplied to those who require it and who attend the Centre, at cost price, or free in necessitous cases.

5,713 lbs. of Dried Milk were disposed of during year, an increase of 1'0 per cent. compared with 1931. Of this amount 2,932 lbs. or 51'3 per cent. was given free compared with 54'0 per cent. in 1931 and 49'0 per cent. in 1930. The amount of milk given free decreased considerably during the second half of the year. From January to June the free supply was 55'1 per cent. of the total, while for the rest of the year it was 44'3 per cent. Every case is fully investigated before the concession is granted.

ANTE-NATAL CENTRE.

The Ante-Natal Centre was in session each Wednesday afternoon during the year, under the direction of Dr. C. Murray Wilson, of Leeds. Both the number of new cases and the total attendances again show a slight decrease but it must be borne in mind that there has again been a heavy fall in the birth rate. In 1931, twenty-eight per cent. of expectant mothers attended the Centre, while in 1932 the percentage was twenty-six. On the other hand the average attendances of expectant mothers shows a slight increase, namely 3'6 compared with 3'4 in 1931 and 2'8 for the seven years 1925—1931.

This decrease in the number of women attending the Centre is rather disappointing, but I am informed by an Inspector of the Ministry of Health who visited the department in the autumn, that taking the country as a whole the proportion of expectant mothers who attend the Centre is extremely good. At the same time I hope that in the future there will be a considerable increase in this direction.

The following are the attendances at the Ante-Natal Centre since its inception in 1925 :—

Year.		Attendance	\C	Expectant Mothers.		Average
i cai.		Attendance		mothers.		Attendance.
1925	• • •	20	• • •	18		1.0
1926	• • •	71	• • •	35	• • •	2.0
1927	• • •	116	• • •	45	• • •	2.6
1928	• • •	251	• • •	93	• • •	2.7
1929	• • •	325	• • •	114	• • •	2.8
1930	• • •	436	• • •	155		2 . 8
1931	• • •	393	• • •	114		3.4
1932	• • •	357	• • •	99		3.6

I append Dr. C. Murray Wilson's report to me on the work of the Centre.

The Medical Officer of Health—

The number of mothers attending the Ante-Natal Clinic during 1932 was ninety-nine. This is fifteen fewer than in 1931. The net births for the district was 379, therefor 26'l per cent. attended the Clinic. That figure compares very favourably with those of other Clinics throughout England, but it is not so high as last year.

The attendances, however, were three hundred and fifty-seven, which gives the average for each patient of 3.6. This is a very high average indeed and shows that once the patient has attended she appreciates the advantages of being cared for during the Ante-Natal period.

Only one patient has required hospital treatment and there have been no maternal deaths among the Clinic patients. There were three still births; one was inevitable owing to severe Albuminuria, the other two was inexplicable.

In September, a meeting of the midwives of the district was called to discuss the Maternal Mortality Report. It was decided at the meeting that: (i) Each midwife would try to induce her patients to attend the Clinic for Ante-Natal supervision; (ii) That the midwife should try to come with the patient at the first visit if possible; (iii) That the Medical Officer should ask the midwife to come with the patient at the thirty-sixth week if any abnormality occurred during pregnancy making a consultation advisable; (iv) That the midwife should stress the importance to each patient of attending for a post-natal examination about six weeks after her confinement.

[signed] C. MURRAY WILSON, M.B., CH.M.

WATER SUPPLY.

The whole of Spenborough, with the exception of isolated cottages here and there in the more sparsely inhabited parts of the district, is supplied with water obtained from the City of Bradford. In Cleckheaton the water is supplied in bulk and distributed by the Authority, while in the rest of the district the water is distributed by the Bradford City water department.

The water is obtained from a large catchment area to the North of Pateley Bridge, and is a soft water of good quality. A copy of analysis of the house supply made December, 1930, is appended below. The supply is, as rule, adequate for all purposes, but in the summer of 1929, following an extended drought during the Winter and Spring, the supply had to be curtailed. This is unlikely to happen again as large extensions have been undertaken by the City of Bradford water department, and are now approaching completion.

Analysis of a sample of tap water taken on December 12th, 1930:—

Total solids, 8 grains per gallon.

Chlorine (combined), '6 grains per gallon.

Nitrates, nil.

Free Ammonia, '0021 grains per gallon.

Albuminoid Ammonia, '0014 grains per gallon.

Lead, nil.

Total Hardness (Clarks Scale), 3.2.

Analysts Report: This is a water of high organic purity, shows no signs of even bygone infiltrated and oxidised drainage. It is very soft, and yet not so soft as to suggest the danger of plumbo-solvency. We should consider it an excellent water for all drinking, domestic, and general industrial purposes.

[signed] F. W. RICHARDSON & A. JUFFE.

Two samples from local supplies were examined during the year and both were satisfactory.

No extensions have taken place during the year.

Complaints having been received that certain persons living in caravans were without an adequate water supply, enquiries were made, and it was found these people obtained their water from a spring. Samples were taken and submitted for analysis, but it was found that the water was fit for drinking purposes.

RIVER POLLUTION.

No complaints of River Pollution were received during the year.

SEWAGE DISPOSAL.

The greater part of the sewage from Spenborough is treated at the Main Sewage Works situated at the extreme South East portion of the district.

There are, in addition, five other small works in the district, situated at Hare Park Lane and Clough Lane, Hightown, Liversedge; Broad Ings, Scholes; Bradford Road, Oakenshaw; and Bradford Road, Gomersal.

To all these works the sewage passes by gravitation and no pumping is necessary.

No alterations or extensions have taken place during the year.

PRIVY CONVERSION WORK.

The following Table shows the position in regard to the Sanitary accommodation of the district:—

Number	of		1931		1932
Houses in the	Distri	ct···	8723	• • •	8737
Water Closets	• • •	• • •	4590		4655
Waste Water	Closet	s	521		519
Privies	• • •	• • •	1468		1429
Wet Ashpits	• • •	• • •	1098		1072
Open Ashpits	• • •	• • •	71	• • •	68
Dry Ashpits	• • •	• • •	758	• • •	754
Dust Bins	• • •		3153		3348
Pail Closets	• • •	• • •	72	• • •	70

During the year thirty-nine privies were converted to water closets, and in all sixty-five water closets were put in, including conversions and extra accommodation.

ASHPIT SCAVENGING.

During the year ending December 31st, 1932, there have been no new developments in this branch of the Department's work. The disposal of refuse by means of controlled tipping is being carried out successfully, and no complaints have been received as to any nuisance arising from any of the three tips. Every effort is made to carry out the work so as to avoid conditions which would leave such method of disposal open to criticism from the point of view of nuisance.

The following Table shows the manner of disposal:—

		Loga.
To Destructor Works, Cleckheaton	• • •	33.15
" Quaker Lane Playing Fields (controlled)	• • •	3495
"Gomersal Tip, Nibshaw Lane (controlled)	• • •	1220
" Abattoir Tip (controlled)	• • •	2213
"Private Tip (controlled)	• • •	1519
"Farmers for manurial purposes …	• • •	904
"Disused Pit Shafts	• • >	1803
Trade Refuse disposed of (Destructor)		463
Total Loads	• • •	15,015

The following figures show the cost of collection, and the cost of the separate methods of disposal:—

	Per Load 1931			1932		
Controlled Tipping	• • •	1s.	$0\frac{1}{2}$ d.	• • •	1s.	0d.
Destructor (Incineration)	• • •	2s.	$9\frac{1}{2}$ d.	• • •	3s.	$1\frac{1}{2}d.$
Collection			$3\frac{1}{2}d.$			
Disposal (All methods)		1s.	$11\frac{1}{2}$ d.	,	1s.	2d.

Combined cost of collection and disposal service:—

1930. 1931. 1932.

7s. $6\frac{3}{4}$ d. per load. 6s. 3d. per load. 6s. 10d. per load.

SANITARY INSPECTOR'S REPORT.

The following is a summary of the inspections carried out under the Public Health Act, and other Acts relating to Sanitary matters:—

Visits to	Premises generally	• • •	• • •	• • •	9229	
,,	Public Abattoir and Slav	ghterho	ouses	• • •	1600	
,,	Bakehouses	•••			61	
,,	Dairies and Cowsheds	• • •	• • •	• • •	363	
"	Factories and Workshop	s	• • •	• • •	118	
, ,	Cases of Infectious Disea	ase		•••	245	
,,	Offensive Trades	• • •	• • •	,	146	
,,	Houses under Public He	alth Ac		•••	891	
,,	Houses under Housing A	Acts		• • •	135	
,,	77 TO 111	• • •	• • •	•••	35	
Drain Te	ests ···	• • •		• • •	12	
	Written Notices		• • •		312	
	Written Notices complie		• • •	•••	258	
	Notices		• • •	•••	3	
Total Nu		68				
New Drainage constructed during the year					734 yards	



DISINFECTION.

The following number of rooms were Disinfected during the year:—

For Scarlet Fever ... 260
Diphtheria ... 15
Typhoid ... 3
Other Diseases ... 24
Total ... 302

Library Books disinfected after Infectious Disease ... 138

OFFENSIVE TRADES.

The Offensive Trades within the District are as follows:—

Soap Boilers	• • •	2	
Tripe Boilers	• • •	1	
Fish Fryers		45	
Rag and Bone Dealers	• • •	2	
Gut Scraper		1	
Total			51

OUTWORKERS.

There are no Outworkers in the District.

SMOKE OBSERVATIONS.

During the year sixty-one observations were taken of thirty minutes each, and the following Table shows the extent of the emissions.

	No.	of Observ	ations
Nil		25	•
1 minute or under	• • • • • •	8	
Over 1 minute and u	nder 3	10	
Over 3 minutes and u	ınder 5	4	
Over 5 minutes .	• • • • •	14	
Tota	.1		61

In all cases of excess of the minimum allowed under the Smoke Abatement Act 1926, information was laid before the offenders and it is pleasing to record that in all cases steps were taken to mitigate the nuisance.

BAKEHOUSES.



There are twenty-four Bakehouses in the District and these have been inspected during the year and found to be in a satisfactory state. There are no Underground Bakehouses in the District.

FACTORIES AND WORKSHOPS.

Defects.		Found.	Remedied.
Bakehouse to limewash		1	1
Dirty Workshops		5	5
Bakehouse ventilation defective		1	1
Dirty Bakehouses		2	2
Want of ventilated space to Factory			
Conveniences		25	5
Totals		34	14
Notices to remedy	• • •	8	7
NUISANCES.			
1101511110115.		Found.	Abated.
Defective condition of Ashpits		11	9
Offensive Privies and Box Closets	• • •		39
Defective doors, walls and seats of Priv			29
Defective Dustbins and want of same	•••		91
Defective and insufficient house drains		4	4
Defective eaves, spouts, fallpipes and room	fing		89
Defective doors, windows, plaster, flo			
and fire ranges		~ ~	41
Defective and damp internal and exter			1.1
walls		0.1	14
Defective and untrapped sink waste pipe		-	22
			44
Defective and dirty W.C. fittings, pans			20
cisterns	٠٠٠		38
Defective and choked W.C. drains			60
manholes	•••		62
Defective and choked sink, yard and ra			4.0
water drains	•••		48
Defective and choked street gullies	•••		8
Defective and untrapped cellar drains	•••		4
Offensive smells in cellar from defect		_	
	• • •		5
Defective subsoil drainage	• • •		6
House drains not connected to sewer		3	3

Coked sewers

JISANCES—continued.					
Accumulation of manure	and ref	1100		Found.	Abated.
Dirty and verminous hous			* * *	9	9
Cowsheds to limewash an			• • •	26	26
Defective construction of		•••	• • •	4	4
	•••	•••	• • •	6	6
Dirty condition of piggeri	es	• • •		2	
Defective and smoky chir	nneys	(houses)	• • •	6	2 5 9
Broken and defective ven	t and s	oil pipes	• • •	10	
Dirty stables	•••	•••		3	2 4 1
Defective and foul stone	sinks	• • •	• • •	6	4
Defective yard paving		•••	• • •	3	
Dirty food premises		• • •	• • •	9	9
Miscellaneous	• • •	• • 2	• • •	4	4
Offensive Trades	• • •	• • •	• • •	23	23
Nuisances from Effluvia		• • •	• • •	6	5
Т	otals	•••	• • •	706	638
H	IOUSII	NG.			
1. Number of New Hous	es erec	ted durii	ng t	he year-	·
(a) Total, including nu					
(i) By Local Authorities		8.702.00	pui		nil.
(ii) By Other Loca	, T	:4:	••	•	
, ,					nil.
(iii) By Other Bodi	es and	Persons	•••	•••	14
(b) With State assista	nce un	der the l	Hou	sing Ac	ets.
(i) By Local Author	ority:				
(a) For the p	ourpose	of Par	t II	of the	
Act of 19	_			• •••	nil.
(b) For the p	uirnose	of Part	TTT	of the	
Act of 19			•••	• •••	nil.
(c) For other	e purpo	ses	• •	• • • •	nil.
(ii) By Other Bodi	es or P	ersons	• •	• •••	nil.
2. Inspection of Dwelling	-house	s during	the	year-	
(i) (a) Total number of	dwelli	ng-hous	es in	spected	
for housing defe	,			•	
or Housing Act					96
(b) No. of Inspection	ons mad	le for the	e pu	rpose···	137

37	(ii) (a) Number of dwelling - houses (included under sub-head (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	
50	(b) No. of Inspections made for the purpose	
nil.	(iii) Number of dwellings found to be in a state so dangerous or injurious to health as to be unfit for human habitation	
96	(iv) Number of dwelling-houses (exclusive of those referred to above) found not to be in all respects reasonably fit for human habitation	
	. Returns under Statutory Order 648—	3.
37	(i) Number of houses which on inspection were considered to be unfit for human habitation	
23	(ii) Number of houses, the defects of which were remedied in consequence of informal action by the Local Authority or their Officers	6
nil.	(iii) Number of representations made to the Local Authority with a view to (a) the serving of notices requiring the execution of works or (b) the making of demolition or closing orders	
37	(iv) Number of notices served requiring the execution of works	
nil.	(v) Number of houses which were rendered fit after the service of formal notices	
nil.	(vi) Number of demolition or closing orders made	
nil.	(vii) Number of houses in respect of which an undertaking was accepted under subsection (2) of Section 19 of the Housing Act, 1930	
nil.	viii) Number of houses demolished	

4.		y of Defects during the year without service of ormal Notices—
	(i)	No. of defective dwelling-houses rendered fit in consequence of informal action to the Local Authority or their officers 82
5.	Procee	dings under Section 3 of the Housing Act, 1925—
	(i)	Number of dwelling-houses in respect of which Notices were served requiring repairs nil.
	(ii)	Number of dwelling-houses which were rendered fit after the service of formal notices:
		(a) By owners nil. (b) By Local Authority in default of owners nil.
	(iii)	Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close nil.
6.		edings under Section 11, 14 and 15 of the Housing et, 1925—
	(i)	Number of dwelling-houses in respect of which Closing Orders were made nil.
	(ii)	Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit nil.
	(iii)	Number of dwelling-houses in respect of which Demolition Orders were made nil.
	(iv)	Number of dwelling-houses demolished in pursuance of Demolition Orders nil.

HOUSING CONDITIONS AND OVERCROWDING.

No change has token place in respect to these matters during the year. A full report on this subject appears in my report for 1930.

MILK SUPPLY.

The Milk Supply during the year has proved equal to the demands of the District, and the following Table shows the number of producers and retailers.

Number of Cowkeepers registered	65
Number of Cowkeepers retailing milk	62
Number of Wholesale Producers	3
Number of Retailers from outside District	26
Number (approximate) of Milk Cows	540

Inspection of Cowsheds and Dairies is carried out throughout the year, and it is pleasing to record that Cowkeepers and Retailers are now realising the necessity for the strictest attention to all details which ensure cleanliness.

Milk, as a food, is more widely used than in previous years, and it is of the greatest importance that the production should be carried out in such a manner as to ensure a disease free supply.

In this direction every effort is made to rid the herds of diseased cows and the County Veterinary Service make periodical inspection of all milk cows in the district and any animal showing signs of disease is destroyed. During 1932, 18 cows were destroyed as being unfit for milk production.

MEAT INSPECTION.

Carcases Inspec	cted-	_		P	ubli	С		Priva	.te	
				Ab	atto	ir	Sla	ughte	erho	uses
Beasts	• • •		• • •	1	,659)		,72	1	
Sheep	• • •		• • •	3	,404	-		1,23	3	
Pigs	• • •		• • •	1	,696)		1,37	2	
Calves	• • •		• • •		74	-		1	4	
			•							
	To	otals	3	6	,833	}		3,34	0	
Meat Surrender	ed a	nd		P	ubli	С		Priva	te	
Destroyed-				Ab	atto	ir	Sla	ughte	rho	uses
, ,			T.	C.	Q.	L.		. C.	Q.	
Tuberculosis		• • •	6	0	3	18	3		$\tilde{2}$	8
Other Diseases			1	13	3	12	0	12	0	17
Total	10		7	14	3	2	3	17	2	25
	12	• • •	/	т.	9	4	3	T /	4	40

Total from Pubic Abattoir & Private Slaughterhouses ... 11 tons. 12 cwts. 1 or. 27 lbs.

PUBLIC HEALTH (MEAT) REGULATIONS, 1924.

During the year one prosecution was taken under the above Order, for failure to notify slaughter and diseased condition. A fine of £100 and costs was imposed.

TUBERCULOSIS FOUND IN BEASTS AND PIGS.

PUBLIC ABATTOIR.

Detailed Report of Tuberculosis found in Beasts and

	neu	Keport or	I uber	cuiosis iouna i	n Deasts at	10
Pigs :—				No. Inspected.	No. Affected	1.
Beasts	• • •	• • •	• • •	1659	· 287	
Pigs	• • •	• • •	• • •	1696	123	

	I	Beasts.	Pigs.
Number of Cases—			O
Calling for total condemnation		10	5
Calling for part condemnation of carcases	• • •	13	2
Calling for condemnation of organs only	• • •	264	116

PRIVATE SLAUGHTERHOUSES.

Detailed Report of Tuberculosis found in Beasts and Pigs:

No. Inspected. No. Affected.

Beasts		• • •	• • •	721		76	
Pigs	• • •	• • •	• • •	1372		96)
					Be	easts.	Pigs.
Number of	Cas	ses					
Calling	for	total cond	demnat	ion	• • •	6	1
Calling	for	part cond	lemnati	on of carcases	• • •	5	1
Calling	for	condemn	ation of	f organs only	* • •	65	94

FOODS, OTHER THAN MEAT, SURRENDERED AND DESTROYED.

Tinned Meat ... 36 lbs. Tinned Fruit ... 21 lbs.

ING TO	System Total Generalised Cases	9	5 10		5 5	6
GENERALISED AND EXTENDING	Bones Glands of Muscular	0	ц,	0	0	
D AND	Udder	9	9	0	0	
RALISE	Kidney	9	7	0	0	
GENE	Spleen	 	m	-	5	
TO	Total of Localised	70	277	95	118	
IMITED .	Heads only	9	30	69	78	
1 7	Organs of both sairies	18	48	18	26	
D AN	Several Organs yiivso sams ni	<i>(</i> 2)	∞	7	7	
LOCALISED AND	One Organ only	43	191	9	12	
ГС	lsmiaA	Cattle.	do.	Pigs	do.	
	DISTRIBUTION OF TUBERCULOSIS IN AFFECTED BEASTS AND PIGS.	Private Slaughterhouses	Public Abattoir	Private Slaughterhouses	Public Abattoir	

Deaths	233	28
Removed to Hospital	24 24 25 27 28 27 28	828
Comersal	11 22 7 1 1 8 8 4 1	75
nwotdgiH	15 6 6 3 37 33	51
Roberttown and Morristhorpe	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	110
9gbi r idlliM	61 14 2 2 3	88
Spen and Littletown	10 2 10 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2	72
West Ward	22 10 22 20 20 22	92
East Ward	330 11 9131	104
Scholes	9 7 7 4 4	23
Oakenshaw	φ H	9
уве поt кпочи		
Over 65 years	n n	10
45 to 65 years	HH CQ 4H	16
Sz to 45 years	11 12 38 131 13	42
15 to 25 years	22 1 25 28	46
5 to 15 years	1 137 5 10 160 4	317
l to 5 years	29 20 20 105 4	30 160 317
Under 1 year	1 41 212 1	30
səgA IIA	209 209 22 22 133	621
	: : : : : : : : : :	:
Table X.	Enteric Fever Scarlet Fever Diphtheria Pneumonia Erysipelas Puerperal Fever Ophthalmia Neonatorum Chicken Pox Respiratory Tuberculosis Other forms of Tuberculosis	Totals

		1	1	163
	СН	slatoT	209 209 222 133 133	621
	SPENBOROUGH	4th Quarter	1 1 1 1 1 2 7 2 2 2 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3	509
ERS	NBO	drd Quarter	22 1 1 3 3	29
QUARTERS.	SPE	Znd Quarter	10 10 171 6 4	207
AUS.		lst Quarter	10 10 10 10 10 10 10 10 10 10 10 10 10 1	138
		SlatoT	11 12 138 14 1	75
AND	AL	4th Quarter	1 1 1	19
LS	GOMERSAL	5rd Quarter	1 1 9 1 1	6
RIC.	GO	2nd Quarter	31 11 13	38
DISTRICTS		lst Quarter	нню нн	6
		slatoT	124 25 25 5 149 6	321
Z	DGE	4th Quarter	21 2 2 2	129
SN	Liversedge	ðrd Quarter	17 18 8	33
ATIONS	LIVE	2nd Quarter	3 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	102
		1st Quarter	12 12 13 13 11 11	57
DISEASE-NOTIFIC	٠,-	slatoT	1 68 4 27 3 104 12 15	225
N-	CLECKHEATON	4th Quarter	L 14 L B L C S S S S S S S S S S S S S S S S S S	61
SE	СКНЕ	ðrd Quarter	10 10 11 10	25
SEA	CLE	Znd Quarter	51 23 3	
<u><u>o</u></u>		lst Quarter	12 1 1 1 1 39 39	72
INFECTIOUS		Table XI.	Enteric Fever Scarlet Fever Diphtheria Pneumonia Erysipelas Puerperal Fever Puerperal Pyrexia Ophthalmia Neonatorum Chicken Pox Respiratory Tuberculosis Other forms of Tuberculosis	Totals

INFECTIOUS DISEASE.

The incidence of Infectious Disease both notifiable and non-notifiable was considerably greater than in any recent year. A very extensive outbreak of Mumps began in the Autumn of 1931 and continued well into the new year. Just as this was abating towards the end of February, Chicken Pox again became prevalent and a widespread epidemic occurred lasting until June. During the spring there was also a fairly large number of cases of Measles. Shortly before the summer holidays there were a good number of cases of Whooping Cough and finally in September the largest epidemic of Scarlet Fever since Spenborough came into existance began and lasted until the end of the year.

Of the Notifiable Diseases there were more than twice as many as in the previous year, but this was entirely due to the epidemics of Chicken Pox and Scarlet Fever. Deducting these cases in each year there were only 121 notifications in 1932 compared with 174 in the previous year.

Diphtheria cases showed a considerable reduction as did Pneumonia, but there were three cases of Enteric Fever as against none in 1931.

Four more cases of Tuberculosis were notified for the first time than in the previous year.

SCARLET FEVER.

The incidence of Scarlet Fever in 1932 can be divided into three definite periods. During the first four weeks of January there were ten cases. These cases were distributed between six Wards and five Schools. Only one school had two cases and in this school one case was in the Infants' Department and the other in the Upper Department. Three cases were of over school age and one was a baby. One case was a visitor who was ill when she arrived in the district. This wide distribution of a comparatively few cases looked at one time as if a fairly widespread epidemic was beginning, but nothing further came of it. The second period lasted from the last week in January to the first week in September, thirty-one weeks in all, during which time there were twenty-five cases notified. The district was at no time entirely free, but in April and May there were only two cases.

The third period began suddenly during the sed of week in September and lasted until the end of the year, seventeen weeks in all, and during this period 174 cases were notified. The epidemic began suddenly and simultaneously in the East and Millbridge Wards, children at Whitcliffe Road and Millbridge Upper Schools being first attacked.

The epidemic spread very quickly, the peak being reached in the fortnight October 22nd to November 5th, during which time thirty-eight cases were notified. There was no definite centre of infection though Millbridge Ward, where incidentally the density of population is greatest, was most heavily attacked. East Ward, which is the next most densely populated area, coming second in number of cases.

After the peak at the end of October the incidence of the disease began to decline slowly with a temporary increase at the beginning of December. At the time of writing this report (mid-February) the number of cases has decreased to a very large extent, but it is still well over the normal for the time of year.

As usual the large majority of the cases (over sixty per cent.) occurred in the age group five to fifteen, but a considerable number occurred in older persons, no less than thirteen being between twenty-five and forty-five and one being aged fifty-two. In all twenty-one per cent. of those attacked were over school age, and had left, thus eliminating in their case one common method of infection.

All parts of the district was attacked, Oakenshaw and Scholes with their low density of population having the fewest cases, five and six respectively. Roberttown and Norristhorpe came third in incidence, followed by the West Ward and Spen and Littletown. Liversedge area had nearly double the number of cases that the Cleckheaton area had. The attack rates per 1,000 living being Liversedge 8.6 and Cleckheaton 5.5. The rate for Gomersal was 3.7.

During November the hospital accommodation for Scarlet Fever was very severely taxed, especially in the Liversedge area, and in order to ease the situation convalescents were housed in the Small Pox block, which fortunately has not been required for its own purpose during the year. In spite of this, admission had to be refused in certain cases, and during the year twenty-two cases were nursed at home. The result of this action is referred to later.

Formerly the uncomplicated case of Scarlet Fever spent about six weeks in hospital but it is the practice now at Crossley Hospital to treat all cases with serum on admission. This has reduced the stay of uncomplicated cases to four weeks. The type of the disease was mild and without complications in the early weeks of the epidemic. Later, while the attacks remained mild, there was a considerable amount of Otitis Media and Adenitis. Two or three cases developed mild Rheumatism but there was little or no Nephritis.

It is extremely satisfactory to note that in spite of the large number of cases there was not a single death.

The infectivity of this particular epidemic presented one or two rather puzzling features. The large number of cases would naturally suggest a high type of infectivity. In fact, in one or two of the schools, the number of cases pointed to a high infectivity, but in others quite the reverse was the case. There was more often than not a delay of a day or two between the patient being taken ill and his removal to hospital. During this time, other inmates of the house were as a rule exposed to infection and one would have expected a considerable number of these "home" contacts to take the disease.

There were in all during the year twenty-nine houses in which there were two or more cases of Scarlet Fever. In these houses there were sixty-four cases, namely twenty-nine "first cases" and thirty-five "subsequent cases." Of these thirty-five cases, three were taken ill at the same time as the original case and therefore probably were infected by the same sources at the same time. Eight began to be ill so long after the first case and whilst that case was in hospital, that it is unlikely that direct infection from the first case was the cause. Five were "return cases," being taken ill within a month of the return of the "first case" from hospital. The remaining nineteen were taken ill within a week of the removal of the first case to hospital and may therefore be said to have been directly infected by the first case. Now in the one hundred and eighty houses from which the two hundred and nine cases came, there were seven hundred and ninety-seven inmates. The one hundred and seventy-four first cases therefore had six hundred and thirteen contacts of which only nineteen or 3'1 per cent. took the disease from the patient.

Of the nineteen direct contacts who took the disease, two were over school age and seventeen were under fourteen years. There were four hundred and forty-four contacts of first cases over fourteen and so only '45 per cent. succumble to the disease, and of the contacts under fourteen years only just under ten per cent. were infected. The extraordinarily small number of the older home contacts who were infected is very remarkable in view of the fact that twenty-one per cent. of all the cases were over this school age.

In the case of the nineteen direct home contacts who caught the disease by direct infection, that is, who were taken ill within a week of the removal of the first case, two were in a house where there was another case which had not been removed to hospital. In the case of the other seventeen the time between the removal of the first case to hospital and the second patient being taken ill was in two cases, one day; in five cases, two days; in two cases, three days; in three cases, four days; in two cases, five days; and in one case each of six days, ten days and eleven days, the last two being very doubtful direct contacts.

Twenty-two cases were nursed at home in twenty houses. In one house there were two subsequent cases, and in one there had been two previous cases which had been removed to hospital. In the eighteen houses where there was no subsequent case there were forty-eight contacts of over school age and twenty-three of under fourteen years or seventy-one in all, none of whom caught the disease.

The school most heavily attacked was Millbridge Church of England School, where there were twenty-nine cases, all between October 18th and December 14th (eight weeks. Thirteen were in the Infants' and sixteen were in the Upper department.

An examination of the dates on which the children attacked were last at school and on which they were first taken ill leads to the conclusion that a considerable number must have been infected in school. Six of the children in the Mixed department and nine in the Infants' were actually in school on the day on which they were taken ill.

Though Millbridge National was more heavily attacked than any other school it seems that the infection was greater in school than at home. It is difficult to understand why the disease should have behaved so differently in the two places, home and school, where one would naturally expect the infection to have most effect. Density of population seems to have been a factor in determining where the disease was most prevalent, but from the general course of the epidemic it has seemed to me that a second factor of some sort may be necessary before the specific infective agent of the disease can cause an attack in a contact.



DIPHTHERIA.

Diphtheria showed a considerable decrease compared with the previous year, only nine cases being notified during the twelve months, compared with twenty-seven in 1931. Five of the cases occurred in the age group 5—15 and there was nobody attacked aged more than 15. Gomersal, as in the previous year, had most cases, namely five, while there were three cases in the West Ward and one in the East. No case occurred during the year in Liversedge. Two thirds of the cases occurred in the first half of the year and only one case in the summer quarter.

Diphtheria has shown a tendency during the past few years to increase both in amount and virulance. The Schich method of immunisation has been adopted in a large number of districts and in the late summer it was commenced in Spenborough. The parents of all school children were circularised and the advantages of protection against diphtheria pointed out. Parents of younger children were informed of the scheme by the health visitors. But the results have been meagre in the extreme. Out of approximately six thousand five hundred children, the parents of only 130 children applied for treatment. Of these, twentysix either failed to come for immunisation when seni for or did not complete the treatment. Thus only obout one and a half per cent. of the total number of children of school age or under have been immunised and no new request for protection has been received for over two months.

CHICKEN POX.

A very extensive epidemic of Chicken Pox began at the end of February and lasted until June. The cases were nearly all among children of school age and under, only five cases occurring in persons of over 15. All Wards were affected except Oakenshaw, but there were only four cases at Scholes and fourteen in Millbridge Ward. Roberttown and Norristhorpe Ward had most cases, namely seventy-two and each of the Cleckheaton Wards had fifty cases. The complaint died away during June and there were only forty-nine cases during the rest of the year.

Chicken Pox has been by far the most prevalent of the ordinary infectious diseases during the past few years, there having been over twelve hundred of these cases in the past ten years.

(1)

OTHER DISEASES.

Pneumonia. There was less Pneumonia than in 1931. Nearly half the cases occurred in the first quarter. Persons of all ages were affected, the greatest incidence being in the one to five age group. The cases were fairly evenly distributed over the whole area.

Enteric Fever. Three cases only were notified during the year, one in each of the three areas. All recovered.

Erysipelus. Nine cases of Erysipelus were notified. One case was in a baby of under twelve months, the other's occurring in persons of over twenty-five. Seven of the cases occurred in the first half of the year.

Puerperal Fever. Two cases of Puerperal Fever and two of Puerperal Pyrexia were notified during the year, all during the first six months. Two cases were in Liversedge and one each in Cleckheaton and Gomersal.

Ophthalmia Neonatorum. Only two cases were reported during the year, both being in Liversedge and both in the first quarter.

Tuberculosis. Thirty-five cases of Tuberculosis were notified for the first time during 1932, an increase of four compared with 1931 and a decrease of five compared with 1930. Of these cases, twenty-two were of the respiratory type and thirteen of other forms. There were no respiratory cases notified in children of under fifteen, but nine of the other types were under this age. No new cases were reported from Oakenshaw, and no new respiratory case came from Millbridge Ward. Scholes, and Spen and Littletown Wards had no new case of non-respiratory Tuberculosis. The cases were fairly evenly distributed over the twelve months except that only two cases of respiratory Tuberculosis were notified in the summer quarter.

INFECTIOUS DISEASES IN SCHOOLS.

This matter is fully dealt with in the Report in the the School Medical Service (see page 34).



OPPTHALMIA NEONATORUM.

There were only two cases of this disease notified during the year, with results set forth below:—

Cases Notified	• • •	•••	2
Treated at home		• • •	2
Vision Impaired	• • •	• • •	nil
Unimpaired	• • •	• • •	2
Total Blindness	• • •		nil
Deaths	• • •	• • •	nil

TUBERCULOSIS.

Thirty-five cases of Tuberculosis were notified for the first time during 1932, of which twenty-two affected respiratory organs.

The following is a summary of the ages of the patients notified:—

Table XII.

	:		New	Cases		Deaths					
Age Periods		Respi	ratory	Nespii		Respi	ratory	Non- Respiratory			
		м.	F.	М.	F.	M.	F.	M.	F.		
0 1 5	• • •			3	1 1 1			1 1 1	1		
10··· ··· 15 20···	• • •	3	1	1	1	1	1 1	1			
25 35 45	• • • •	3 1 1	5 2 1	1	1	1 1	2				
55 65 and upward Age not known		2 2		1		1		1	,		
Totals	• • •	13	9	8	5	4	5	5	1		

In five deaths from Tuberculosis notified during year, the cases had not previously been notified. This is an extremely high proportion, but two cases were Tuberculous Meningitis, one Tuberculer Peritonitis and one Tuberculeris of the Adrenals. These cases had probably only been diagnosed shortly before death. Only one case of Pulmonary Tuberculosis had escaped notification.

The following Table gives the number of cases of Tuberculosis on the register on December 31st, 1932.

Table XIII.

		Pulmonary	Non- Pulmonary	Total
Males	•••	91	3 8	129
Females	• • •	68	43	111
Total	•••	159	81	240

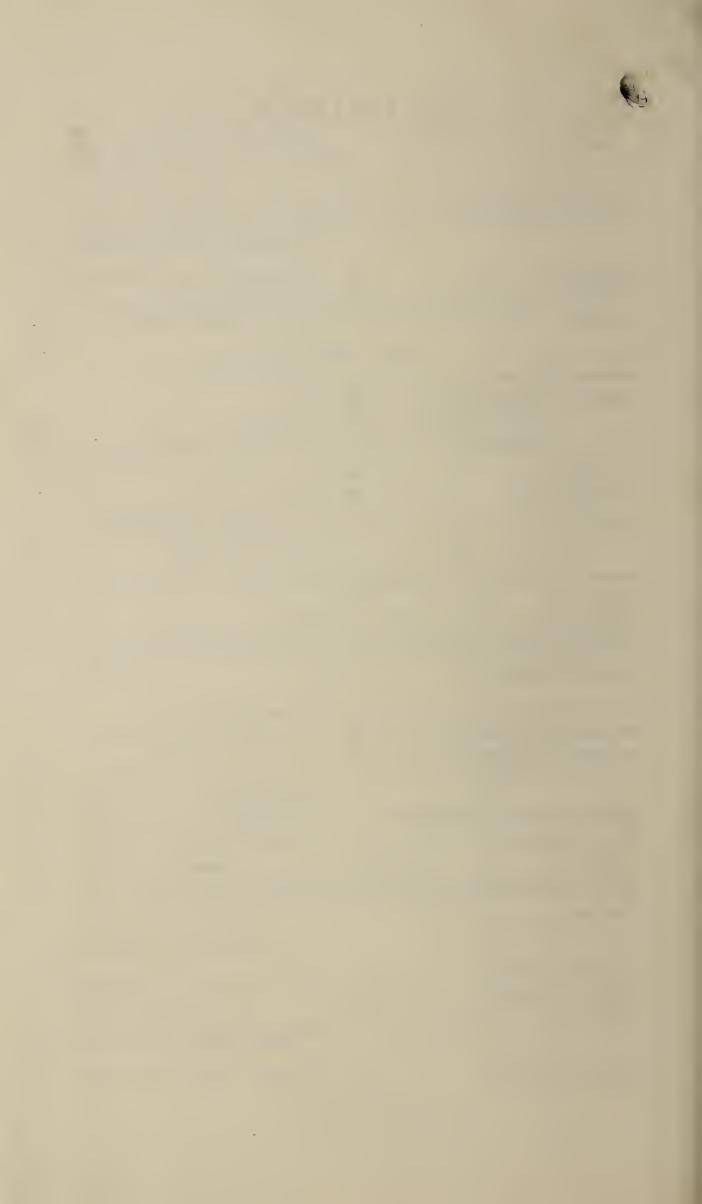
Twenty-six notifications were received of admissions of persons suffering from Tuberculosis to Sanatoria, and eighteen of those discharged.

The following are the Institutions to which Tuberculosis patients were sent:—

patients were sent.				lmi <mark>s</mark> sio Form 1		Discharges Form 2.
Middleton-in-Wharfeda	ale	•••	• • •	12	•••	10
Cardigan Sanatorium	• • •	•••	• • •	_	•••	1
Morton Banks	• • •	• • •	• • •	5	•••	3
Shropshire Orthopædic	Hospi	tal	•••	1	•••	1
Wyton Sanatorium	• • •	• • •	•••	2	• • •	
Crookhill Hall	• • •	• • •	•••	3	• • •	2
Eldwick	• • •	•••	• • •	1	• • •	
Dean Head	•••	•••	• • •	1	• • •	1
County Hospital, Batle	y	• • •	• • •	1	• • •	

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METEOROLOGICAL OBSERVATION 32.

	January February March	1st Quarter April May	June 2nd Quarter	July August September	3rd Quarter October	November December	1932	1930
Minimum 29 Mean 30 Thermometer Maximum 58 Minimum 20 Minimum 40 Rainfall, inches	$egin{array}{cccccccccccccccccccccccccccccccccccc$	30·031 30·480 30·183 29·243 29·069 29·708 30·284 29·811 67 29 945 61 67 26 28 40·4 2·45 25 140·2 35 140·2 35 17 3 35 7 9	3 29 975 29·069 3 76 76 76 35 26 56·9 49·8 ·14 4·69 3 46 137·2 286·3	29·373 29·786 29·4 29·997 30·110 29 9 84 85 75 46 44 28 60·5 62·1 54 1 2·91 67 1 2 19 7 13	30.022 29.76 85 62 28 28 58.9 46.8 4.86 3.02 39 21 8 313.1 56.5	4 30·120 30 024 29·9 60 56 62 25 26 43·3 41 2 43·9	969 30·059 30 85 74 20 17 8 48·2 47 73 16·73 28 163 17 •2 841·8 91	001 29 933 Inches 90 Degrees 21 Degrees 0 48.2 Degrees 29 29.3 Inches 2 181 Days 2.7 861.7 Hours 2.1 20 9 Per Cent.

RAINFALL.

SUNSHINE.

	1923	1924	1925	1926	1927	1928	19 29	1930	1931	1932	1925	1926	1927	1928	1929	1930	1931	1932
January February March April May June July August September October November December	4·42 1·61 1·81 2·94 ·68 4·84 3·14 1·8 2·12 3·32 2·4	1·86 ·86 1·26 1·28 4·06 2·08 2·62 2·34 2·84 3·64 2·63 2·51	2·56 3·95 1·14 2·15 4·16 ·09b 1·9 3·5 2·37 2·82 1·91 3·24	2·4 2·03 ·9 ·8 2·59 2·94 3·34 3·31 1·4 2·43 3·15 ·93	1·84 ·81 2·07 1·84 1·58 2·01 2·78 3·26 3·32 2·19 2·99 2·1	4·56 2·8 1·74 ·68 1·83 2·73 ·27 2·94 ·25 3·39 3·46 ·93	1·54 ·29 ·24 ·74 1·16 ·75 1·91 2·12 ·81 2·08 4·08 4·28	3·58 ·59 2·44 1·75 1·32 1·74 4·06 2·94 3·53 2·85 2·67 1·83	1·43 2·49 ·27 2·88 2·29 4·76 2·85 3·04 3·09 1·02 3·2 ·95	1·22 ·20 ·95 1·57 2·98 ·14 2·91 ·67 1·28 3 02 1·14 ·57	20·7 66·5 73·4 109 106·7 167·4 130·2 95·5 92·2 87·6 44·6 25·7	26·6 35·7 77·6 106·6 130·4 138·8 153·7 135·2 113·7 84 26·3 31·5	22·7 34·5 91·5 133·8 116·3 144·2 120·3 90·6 89·4 70·2 39·7 16·7	24·7 52·4 63·7 112·5 99·2 144·4 202·7c 149·8 96·9 80·6 38·0 8·1d	12·5 9·2 110·4 111·0 153·5 144·7 155·6 111·3 131·6 86·5 18·4 29·0	38·2 21·1 78·3 56·8 102·7 137·7 84·5 123·5 81·0 85·7 42·2 9·8	24·7 28·2 87·3 89·7 128·7 104·6 106·8 116·2 76·0 99·9 28·7 21·8	41·0 26·4 72·7 85·1 64·0 137·2 97·5 114·7 100·8 56·5 21·7 24·4
Total	30.53	27.98	29.89	26.22	26.79	25·58	20.0	29.3	28·27	16.73	1019.5	1063·1	969.9	1073	1073.7	861 5	912-6	841.8

b-Dryest month in 25 years.

c—Sunniest month in 11 years.
d—Most sunless month in 11 years.

Wettest months in 27 years: August, 1922, with 5.12 inches and

September, 1918, with 7.8 inches.

Annual Rainfall for 27 years, 28 26 inches.

Dryest year, 1932, 16.73 inches. Wettest year, 1912, 39.97 inches.

Average sunshine for 11 years, 962.71 hours.

Sunniest year, 1924, 1106.4 hours. Most Sunless year, 1922, 807.5 hrs. The wettest periods for three months since 1919 was May to July, 1920,

13.06 inches. July to September, 1922, 12.16 inches. November 1929 to January, 1930, 11.94 inches.

The dryest period of three months since 1919 was February to April, 1929, with 1.27 inches.

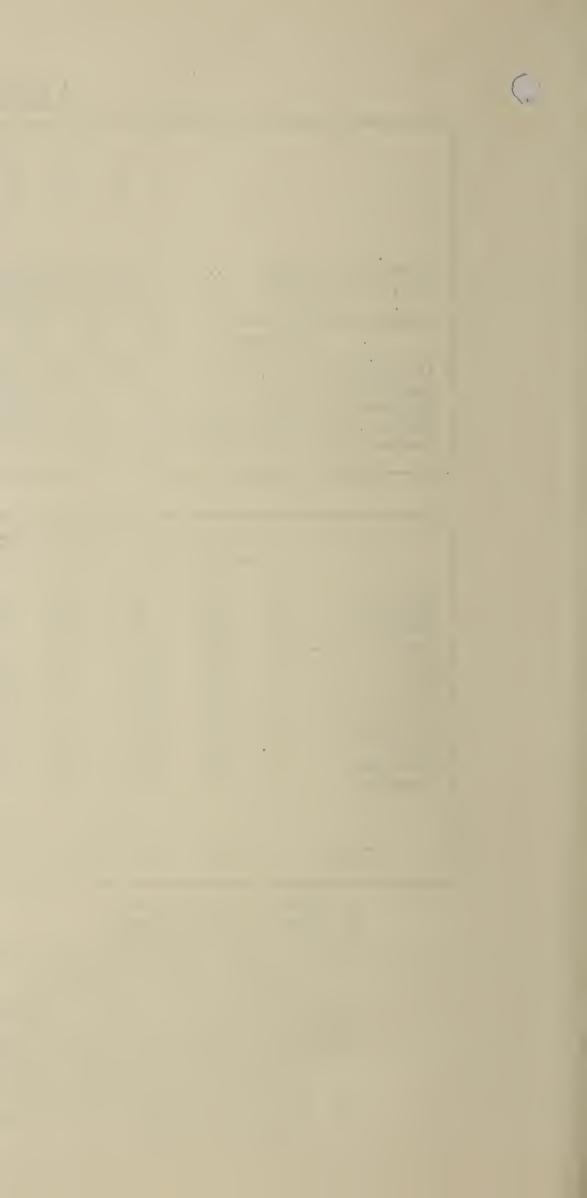
From December, 1928, to June, 1929, only 5.65 inches of rain fell, 8 inch per month.

The sunniest period of three months since 1921 was June to August, 1928, with 496.9 hours and May to July, 1929, with 453.8 hours.

The most sunless period of three months since 1921 was December, 1928, to February, 1929, with 29.8 hours, or just under twenty minutes per day.

From March to September, 1929, there was 918.1 hours of sunshine or 94 per cent. of the average yearly amount for 11 years.

From January 16th to March 4th, 1932, the corrected reading of the Barometer was never below 30 inches. On Jany. 26th, 1932, the reading was 31.031 inches, the highest here since records were taken. The average reading for February was the highest for any month for eleven years.



METEOROLOGICAL OBSERVATION, 1 32.

	January	February	1st Quarter	April	May	June	2nd Quarter	July	August	September	3rd Quarter	October	November	December	4th Quarter	1932	1931	1930	
Minimum	29 278 30·176 58 20 43·0 1·22 11 41 41	30·911 30·4 30·392 29 2 30 627 30·6 52 52 22 21 38·0 40·3 ·28 4 10 26 4 72· 10·6 15 8	29·243 049 30·284 58 20 40·4 2·45	29·069 29·811 61 26 43·3 1·57 23 85·1	29·708 29 945 67 28 49·1 2·98 20 64·0	29 975 30·133 76 35 56·9 ·14 3 137·2	29·069 29·963 76 26 49·8 4·69 46 286·3	29·3/3 29·997 84 46 60·5 2·91	30.110	29 960 75 28 54 1 1 28 13 100 8 28 8	29.373 30.022 85 28 58.9 4.86 39 313.1	29·413 29·764 62 28 46·8	29.583 30·120 60 25 43·3 1·14 18 21·7	30 024 56 26 41 2 ·57 14 24·4 11·6	29·969 62 25 43·8 4·73 53 102·2 13·4	30·059 85 20 48·2	30·001 74 17 47·0 28·29 172 912·7	29 933 90 21 48·2	Thenes

RAINFALL.

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1	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1925	1926	1927	1928	1929	1930	1931	1932
January February March April May June July August September October November December	4·42 1·61 1·81 2·94 ·68 4·84 3·14 1·8 2·12 3·32 2·4	1·86 ·86 1·26 1·28 4·06 2·08 2·62 2·34 2·84 3·64 2·63 2·51	2·56 3·95 1·14 2·15 4·16 ·09b 1·9 3·5 2·37 2·82 1·91 3·24	2·4 2·03 ·9 ·8 2·59 2·94 3·34 3·31 1·4 2·43 3·15 ·93	1·84 ·81 2·07 1·84 1·58 2·01 2·78 3·26 3·32 2·19 2·99 2·1	4·56 2·8 1·74 ·68 1·83 2·73 ·27 2·94 ·25 3·39 3·46 ·93	1·54 ·29 ·24 ·74 1·16 ·75 1·91 2·12 ·81 2·08 4·08 4·28	3·58 ·59 2·44 1·75 1·32 1·74 4·06 2·94 3·53 2·85 2·67 1·83	1·43 2·49 ·27 2·88 2·29 4·76 2·85 3·04 3·09 1·02 3·2 ·95	1·22 ·20 ·95 1·57 2·98 ·14 2·91 ·67 1·28 3 02 1·14 ·57	20·7 66·5 73·4 109 106·7 167·4 130·2 95·5 92·2 87·6 44·6 25·7	26·6 35·7 77·6 106·6 130·4 138·8 153·7 135·2 113·7 84 26·3 31·5	22·7 34·5 91·5 133·8 116·3 144·2 120·3 90·6 89·4 70·2 39·7 16·7	24·7 52·4 63·7 112·5 99·2 144·4 202·7c 149·8 96·9 80·6 38·0 8·1d	12·5 9·2 110·4 111·0 153·5 144·7 155·6 111·3 131·6 86·5 18·4 29·0	38·2 21·1 78·3 56·8 102·7 137·7 84·5 123·5 81·0 85·7 42·2 9·8	24·7 28·2 87·3 89·7 128·7 104·6 106·8 116·2 76·0 99·9 28·7 21·8	41·0 26·4 72·7 85·1 64·0 137·2 97·5 114·7 100·8 56·5 21·7 24·4
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SPENBOROUGH EDUCATION COMMITTEE



REPORT

OF THE

SCHOOL MEDICAL OFFICER

For the Year 1 9 3 2



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LAWRENCE PICKERING-PICK, M.R.C.S., L.R.C.P., D.P.H.

Surgeon to Nose & Throat Clinic:

W. R. E. UNTHANK, M.D., F.R.C.S., D.P.H.

Opthalmic Surgeon:

A. McKIE REID, F.R.C.S.

Dentist: MARION M. THOM, L.D.S.

Radiographer: T. O. HELLIWELL, M.R.C.S., L.R.C.P.

Director of Education:

J. W. H. BURY, Esq.

School Nurses:

Miss E. M. FIRTH, Certif. C.M.B.

Miss P. W. HOLMES, Certif. C.M.B.

Miss E. McLEOD, Certif. C.M.B.

Miss F. H. WILLIAMS, Certif. C.M.B.

Clerk: Miss M. FURNESS



SPENBOROUGH EDUCATION AUTHORITY

ANNUAL REPORT of the

SCHOOL MEDICAL OFFICER

To the Chairman and Members of the Education Committee.

Ladies and Gentlemen,

I have the honour to present to you my Annual Report for the School Medical Service for the year 1932, being the thirteenth of the series.

The report is planned according to the suggestions of the Board of Education, and the statistical tables, setting forth particulars specially required by the Board are grouped at the end of this report.

Routine School Medical Inspection has been carried out regularly throughout the year, all schools being visited each quarter. In the case of some schools two visits are sometimes necessary in one quarter.

The number of children examined at the Routine Inspections was rather less, twenty-five to be exact, than in the previous year. The smaller number of County Minor Scholarships awarded would account for this, as all the children who have been successful are examined in July, irrespective of age.

As noted later in the report, there were again a large number of 'under five's' who have not yet been examined owing to their extremely irregular attendance.

There was a slight falling off in the number of parents who attended the examination of their children in the mixed departments, but over ninety-two per cent. of the parents of children in the Infant Schools responded to the invitation to attend. The general attendance of parents must be considered very satisfactory, three-quarters having attended. Quite a number of those who did not attend sent notes in explanation and gave information with regard to their children.

The general condition of the children examined has quite maintained the high standard of recent years. Defects due to neglect, though not entirely absent, are comparatively rare. This, of course, is due to some considerable extent to the supervision of the nurses at their weekly visits to the schools, but the general care at home has much to do with this satisfactory state of affairs. It is only here and there that one finds cases of definite neglect, but when they do occur they present a somewhat difficult problem. These cases are, however, becoming gradually fewer.

The returns for the Nurses Cleanliness Inspections are again very satisfactory indeed, only five and a half per cent. of all children examined showing any evidence of uncleanliness.

Excluding dental defects, 86 defects were found in every 100 children examined, compared with 81 in 1931 and 107 in 1921. If, however, cases of slightly enlarged tonsils which required no treatment and also cases showing evidence of old rickets are excluded, the number of defects per hundred examined was only 53, compared with 51 in 1931 and 78 in 1921.

Of all children examined, 6-3 per cent. were found to be suffering from no defect whatever, and in a further 32.1 per cent. the only ascertainable defect was carious teeth. Allowing for these, the remaining children showed 181 defects for each hundred examined, or nearly two each.

The number of children having enlarged tonsils requiring active treatment, and adenoids, still continues to decrease. This, as pointed out, in a previous report, is due to the larger number who are operated on privately or in hospital compared with what was formerly the case. On the other hand the number of cases with slightly enlarged tonsils does not show any reduction.

Cases of active rickets are practically non-existent. The evidently old rickets as shown by bone changes are definitely fewer than in former years, and on the whole are nothing like as severe. This is probably due to the improved methods of infant feeding.

As in former years the commonest defect apart from dental caries and slightly enlarged tonsils, was defective vision. Twenty-six and a half per cent. of all children whose vision was tested at routine examinations, that is, all over seven, were found to have defective vision in some degree or another, and the visual acuity of 83.6 per cent. of the eyes of these children was found to be subnormal. The number of cases of subnormal vision and the number referred for

trement was about the same as in previous years. In addition a large number of special cases were seen which were referred by the teachers and parents. All cases that had received glasses the previous year were re-inspected, and in a few cases where the corrections appeared to be unsatisfactory, a further refraction was carried out.

One hundred cases found at routine inspection were referred to the ophthalmic clinic, and of these ten refused treatment.

Mr. McKie Reid of Liverpool attended on ten occasions, and all cases of squint, astigmatism and severe myopia were referred to him.

Ringworm was nearly unknown during the year, only one new case having come to light.

The dental service continues to function in a satisfactory manner, the percentage of children notified for treatment who attended remaining about the same.

It was not found necessary to make many additions during the year to the register of "Exceptional" children, details of whom will be found in Table III (Statistical Tables) at the end of this report.

The largest group of these are the delicate or so-called Pre-Tuberculous children. Many of these would benefit by an open-air school.

An investigation was made during the summer into the mental condition of a group of dull and backward children. A detailed report of this will be found in the body of the report.

There have been no changes in the staffing of the School Medical Department during the year.

I have again to express my thanks to the Director of Education for his co-operation and ready help in enabling me to carry out my duties as School Medical Officer with the minimum of disturbance to School Routine, and also to my clerk for the preparation of certain of the Tables in this report.

I am,

Ladies and Gentlemen, Your obedient servant,

L. PICKERING-PICK,

School Medical Officer.



ROUTINE MEDICAL INSPECTION.

AGES AT INSPECTION.

All children in Elementary Schools are, or should be, examined three times during their school life. The first examination is on entrance to the infants' department, the second during the ninth, and the last during the thirteenth year of age.

In Spenborough the examinations take place, as regards entrants, at the first visit paid to the school by the School Medical Officer after entry, and the other two during the quarter in which the child reaches the age of eight years and six months and twelve years and six months respectively. Visits are paid to each school once at least every quarter, and it is thus possible to keep the examinations up-to-date. At the end of any given year all children in the Intermediate and Leaver groups due for inspection have been examined with the exception of a few who happened to be absent from school on the date of the final visit of the year.

It is not possible, however, to keep up to date to anything like the same extent in the examination of entrants. A very large number of Spenborough children come to school for the first time before the compulsory age of five, many being sent immediately on reaching their third birthday. Many of these attend most irregularly, some only coming to school in the mornings and others only in the afternoon, just as the whim happens to take them or their parents. In consequence a large number of these small children are missed time after time, in fact, some are never examined at all until they reach the age of compulsory attendance.

The number of these irregularly attending "under fives" which had shown a decrease in 1930 again went up last year. Three hundred and seventy-six notifications of examinations of these very young children were sent out, and no less than one hundred and nineteen of them were absent, some having been removed from the register until reaching the age of five. This gives a percentage of 31.6 compared with 31.5 last year, and 28.6 per cent. in 1930.

The children noted in Statistical Table I as Other Routine Inspections are older children coming to a Spenborough School from some other district, and who do not, owing to their age at the time, fall into one of the code groups, and also a few children who for one reason or another have missed a Routine Examination.

At the Routine Inspections, any cases specially referred to me by Head Teachers, School Nurses, or Parents, are seen as "Specials," and old cases are, when considered necessary, re-inspected.

During the year, 1,339 children were examined at the Routine Medical Inspections, a decrease of twenty-five compared with the previous year. There was a considerable decline in the number of entrants examined, this being due in part to a decrease in the number of "under fives" and in part to the continuous fall in the birth rate. In addition, owing to the new method of getting to know of new admissions introduced during 1931, and mentioned in my last report, a certain number of children who would have, under the previous scheme, been examined in 1932, had already been seen in 1931.

There was a slight increase in the number of intermediates examined, and a large increase in the leavers. This latter was due to the fact that the leaver group consisted of children born in 1920 when the birth rate was abnormally high.

FINDINGS AT MEDICAL INSPECTIONS.

CLOTHING AND FOOTGEAR.

There is little to note in this matter that has not been dealt with in previous reports.

The children on the whole are cleanly and sufficiently clad and well shod. There are more defective boots than clothes, one of the chief defects of the former being the use of light sand shoes in wet weather. Clogs are by no means as common as formerly.

It is rare to find children with ragged clothes and for the most part the amount of clothing is adequate. There were, as usual, a certain number of the younger children who were greatly overclothed.

It is very rare indeed to find that a child has defective clothing when its mother is present at the examination, practically all such cases occurring amongst children where mothers will not trouble to be present.

MALNUTRITION.

The children in the Spenborough Elementary Schools are on the whole well nourished and well cared for, but there are a small percentage which are definitely under-nourished. The estimation of a child's nutritional condition is by no means easy, and during the past few years a formula has been adopted, by which this condition is estimated. The formula is based on weight combined with the ratio of weight to height. This, so far as can be judged, gives a fairly accurate indication of the child's nutritional condition, but cases are occasionally found where it gives a false estimate, but these are very few.

During the year nine boys and seventeen girls were found to be of subnormal nutrition, and three boys and ten girls to be suffering from definite malnutrition. Thus, the nutrition of the 1,339 children inspected during the year was found to be subnormal in 1.94 per cent. and definitely bad in .97 per cent. In other words 97.09 per cent. were well nourished according to the standard adopted. These figures are substantially the same as in previous years.

Sixty-nine children whose nutrition had previously been estimated as subnormal were re-examined, and twenty-five were found now to be normal, a percentage of 36.2.

Table I is a summary of these cases arranged according to the schools attended. It will be seen that there is a considerable degree of variation in different parts of the area, but it must be borne in mind that this formula was only put into use in the middle of 1929, and consequently only about three-quarters of the children in the schools have been subjected to its standard.

Table I.—SUBNORMAL DEVELOPMENT.

	tot Jevelo			4x 2996777266	83
AL			M	4H HWHW4WW4Q F	39
TOTAL			SN	Q HW4WQ44Q&WHQQ	44
	Now Normal	slii	Э		11
ES	Non	sko	B	H4 4HHHH	14
CASES	e	Girls	M	41 4404 444	13
Ą	No Change	5	SN	1 121 1 12	11
OLD	No C	Boys	×	O O	13
		ğ	SN	124 21	<u>-</u>
			J	1 1 4	9
	n	Girls	Н	г	Н
	tritio		n		М
	Malnutrition		L	0	2
CASES	Z	Boys	Н		
CAS			田	П	1
NEW			J	2	9
Z	rition	Girls		1 1 2 1 1	9
	Subnormal Nutrition		田		23
	rmal		7	H H	62
	upne	Boys	<u> </u>	HH H HH	Ŋ
			田	F F	2
		SCHOOLS		Oakenshaw Council Scholes National Hoorend C.E Hightown Council Whitcliffe Road Council Heaton Avenue Council Heaton Avenue Council Littletown Council Comersal National Comersal National Gomersal National Roberttown Senior Roberttown Junior Roberttown Junior	ALL SCHOOLS

E Children under 7. I Children 7 to 12.

L Children over 12.

UNCLEANLINESS.



Out of the 1,339 children inspected, 32 were found defective in this respect, giving a percentage of 2.4, compared with 2.6 last year and 1.8 in 1930. The total number is small, and so far as the elder children are concerned most have been previously found to be dirty. As is always the case, the majority of defectives were girls with nits in their hair. In most of the cases the defect was slight, and in no case was the hair in a very bad condition. The only really bad case seen during the year was a special, an old offender.

The parents of this child were prosecuted under the School Attendance Bye-Laws and a conviction was obtained. When re-examined a week or two later this child was found to be perfectly clean.

The figures for Routine Inspection are rather better than those given in the following section, relating to the Nurses' Cleanliness Inspection. This is partly due to the fact that no notice is given to parents of the latter and also because certain children, who are always unclean have to be included time after time in the Cleanliness Inspection records whereas they only appear in the Medical Inspection records once in four years.

The following shows the findings at the Routine Examinations. The head defects include Sores, Pediculi, Nits, Dirty Scalps, and the body defects, Dirt and evidences of Vermin.

Heads.		Bodies	
Boys.	Girls.	Boys.	Girls.
1	26	2	3

CLEANLINESS INSPECTIONS.

A scheme for the inspection of children with regard to cleanliness has been instituted, and is carried out by the School Nurses.

When conducting this inspection the Nurse sees every child in the school and notes the condition, whether clean, with nits, pediculi, dirty scalps or dirty bodies. The names of the defectives are entered on a special card and the defect noted against the child's name. Notices are then sent to the parents calling attention to the fact and advising and giving directions for the treatment.

In about ten days' time the Nurse again visits the same school and re-inspects those children who were found to be defective at her previous visit. It is hoped by this means, and by following up the bad cases, that the greater number will be cured. The matter is a difficult one to deal with, the attitude of certain parents to this condition being most casual.

Owing to representations of the Board of Education there are now three of these Cleanliness Inspections during the year in place of the two previously considered to be sufficient.

In view of the low percentage of dirty children and of the fact that those who are found defective in this respect are the same, for the most part, year after year, and that their parents take no notice whatever of advice, it is rather difficult to see what good purpose can be served by this extra inspection.

The inspections are held when the school reassembles after the Christmas holidays, after Whitsun, and during the Autumn terms.

At the three Examinations there were 11,613 inspections, of which 94.5 per cent. were clean, leaving only 5-5 per cent. defective, which is slightly better than last year, when 5.7 per cent. were defective.

At the Spring inspection, 94.3 per cent. were clean, in the Summer 94.5 per cent. and at the Autumn inspection 94.6 per cent. were clean. The results for the year were slightly the best on record. 577 children were re-examined and 158 were found to show no improvement, a percentage of 27.4. This is a definitely smaller percentage than in previous years.

Allowing for the fact that these 158 children were found at the three inspections, and that a certain number of children were absent at the time of the Nurse's visit, it appears that the parents of about four and a half per cent. of the children attending the Spenborough Schools are either too stupid or too lazy to give their children the attention they need.

The School Nurses report that year after year children from the same families show signs of infestation. A considerable number make some attempt to remedy the condition when their attention is drawn to it, but immediately direct supervision is withdrawn the condition recurs. It is very difficult to know what to do in these cases. It is extremely unfair to the large majority of parents who keep their children in the good condition in which most of the Spenborough school children are that their children should run the risk in being infested owing to the crass laziness of a very small minority.

Notices, advice and even threats have no effect whatever on these people, and though I dislike the idea of Court proceedings intensely, I see no alternative but that for dealing with these cases.

There was, as usual, some difference in the returns from the various schools. The best return was 99.2 per cent. clean from Roberttown Council School at the Spring Inspection, but this figure was not maintained at the later inspections. The worst return was 80.4 per cent. clean at Littletown, also at the Spring Inspection. This school improved definitely during the year. Seven schools returned 95 per cent. or over, clean, at each inspection, and only two under 90 per cent., at each inspection. The schools with the best returns throughout the year were: Scholes with 97.5 per cent. clean, and Hightown Council with 97.2 per cent.

Tables II, III and IV give a summary of the Nurse inspections and re-inspections.

Per Cent.		•	75.0	100.0	83.3	71.4	55.5	85.7	83.3	71.4	93.7	76.1	45.4	1	1	20.0	71.4	30.0	20.8
Improved	2	9	က	ರ	5	<u>ت</u>	ಸ೦	12	70	15		16	5	1	1	C 1	10	က	129
No. Re- examined	L-	2	4	5	9		6	14	9	21	32	21	11	H	က	4	14	10	182
Per Cent.			98.1					94.3		91.3			94.9	99.5				9.16	94.3
Clean	\cup	\vdash	215	-	0	9	CJ	3	∞	∞	70	197	227	130	CA	56	358	121	3525
With other defects		က		-	1	9	7	6	5	9		5	4			1	∞	4	72
With Nits only	\int_{0}^{∞}	4	4	5	9	CJ	റാ	ũ	5	21	27	22	∞	1	C 3	4	~	2	140
No. Examined	216	122	219	124	208	277	337	248	190	311	194	224	239	131	132	09	373	132	3737
SCHOOL	Moorend C.E.	St. Luke's C.E.	Hightown Council	Oakenshaw Council	Scholes National	Heaton Avenue Junior & Infants	Whiteliffe Road C. Junior & Infants	Millbridge National	South Parade Modern	Gomersal Council	Littletown Council	Gomersal National	Norristhorpe Council	Roberttown Council	Hightown National	Knowler Hill Council	Millbridge Council	Roberttown National	ALL SCHOOLS

Table II.—SPRING CLEANLINESS INSPECTION, 1932.

Per Cent.	50.0 83.3 100.0 40.0 40.0 40.0 40.0 62.5 96.1 69.4 84.6 66.6 75.0 83.3	0.00
Improved	4 & & & & & & & & & & & & & & & & & & &	5
No. Re- examined	88 111 120 86 120 86 120 86	407
Per Cent.	96.3 95.0 97.2 96.2 95.2 95.3 96.3 96.3 96.3 96.3 96.3	0 + 0
Clean	214 116 251 122 211 309 345 246 246 217 217 127 108 132	1010
With other defects	21221201000000000000000000000000000000	30
With Nits	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	071
No. Examined	222 122 258 127 216 321 360 247 244 244 243 131 114 80 419 142	0313
SCHOOL	Moorend C.E St. Luke's C.E Hightown Council Scholes National Heaton Avenue Junior & Infants Whitcliffe Road C. Junior & Infants Whitcliffe Road C. Junior & Infants Gomersal Council Littletown Council Roberttown Council Roberttown Council Roberttown Rational Knowler Hill Council Knowler Hill Council Knowler Hill Council Knowler Hill Council Roberttown National	000000

Table III.-SUMMER CLEANLINESS INSPECTION, 1932.

				I	I			
SCHOOL	No. Examined	With Nits	With other defects	Clean	Per Cent.	No. Re- examined	Improved	Per Cent.
Moorend C.E.	224	7	က	-		10	5	50.0
St. Luke's C.E.	123	ന	က	\vdash	•	9	9	•
Hightown Council	245	8		236	96.3	6	9	9.99
Oakenshaw Council	132	41	H	C1	•	5	5	
Scholes National	219	70	- Commonwell	-		4	က	4
Heaton Avenue Junior & Infants	292	50	8	1		11	2	
Whiteliffe Road C. Junior & Infants	298	ന	9	00		7		
Millbridge National	221		12	0		16	10	
South Parade Modern	263	ന	က	10		9		•
Gomersal Council	331		11	0			23	
Littletown Council	213		0	0		22		
	231	25	2	0				92.5
Norristhorne Council	251		4	4		5	4	
Roberttown Council Senior	80	41	က	F-		2	9	
	144		က	140	•	4	C 7	
Knowler Hill Council	09		4			4	67	
Millbridge Council	388	00	9			13	12	
Roberttown Junior & Infants	182	C7	8			∞	7	
ALL SCHOOLS	3897	115	92	3690	94.6	191	147	6.92



Table IV.-AUTUMN CLEANLINESS INSPECTION, 1932.

MINOR AILMENTS.



Comparatively few of these cases were found at Routine Examinations. Twenty-two cases of Anæmia were found, of which thirteen were referred for treatment unless already under medical care. This was more than twice the number

of cases found in the previous year.

The commonest of these ailments were non-tuberculous chest trouble, of which there was considerably less than in 1931, probably due to the good Summer. There were sixty-six of these cases, of which two were definite bronchitis, both of an old standing nature, and the rest were slight catarrh. Twenty of these cases were referred for treatment and the rest re-inspected on my next visit to the school, when in practically every case the condition had cleared up.

ENLARGED TONSILS AND ADENOIDS.

Three hundred and nineteen children, or 23.8 per cent. of all examined, were found to be suffering from enlarged tonsils, or adenoids, or both. This is a slight increase, 2.8 per cent., on the previous year.

The large majority were cases of slightly enlarged tonsils with no evidence of adenoids and required no treatment, though all were subsequently re-inspected. Sixteen only of these cases were referred for treatment. (See treatment of tonsils and adenoids page 31.)

TUBERCULOSIS.

Only one definite case of Tuberculosis came to light during the year at routine inspection, namely a case of Glandular Tuberculosis.

SKIN DISEASES.

Fifty-four cases of skin diseases were found during the year, rather less than in the previous twelve months. Of these, thirty-eight were referred for treatment. There were seventeen cases of impetigo, two more than in 1931, all of which were referred for treatment. No case of Scabies was seen at routine inspection, but six cases were seen during the year as Specials.

RINGWORM.

It is most satisfactory to be able to report that this troublesome and time-wasting complaint has been almost entirely eradicated, at least for the time being, from the Spenborough Schools.

At the Routine Examinations no case of head ringworm was discovered, and only one case of body ringworm.

Apart from routine inspections four cases came to light, namely, three of the scalp and one of the body. Of the former, two were old cases from the previous year, who cleared up and returned to school before Easter. The only new case during the year occurred in a child of under five, in July. Treatment was immediately resorted to, and the child was ready for re-admission in October. In addition to the above, hairs were taken for examination from four suspicious cases, but all were reported as negative.

During the past few years ringworm has been becoming more and more uncommon, and unless a fresh infection is introduced from outside it may reasonably be hoped that cases will continue to be rare. I attribute this satisfactory state of affairs entirely to the rigid exclusion of all infected children from school until they are proved to be free from the disease.

Ten specimens of suspected hair were sent to the County Bacteriological Laboratory at Wakefield for examination with the following results.

	Positive	Negative
Primary Examination	1	4
Subsequent Examination	1	4

EAR DISEASES.

Seventeen cases of Otitis Media were found during the Routine Examinations during the year, and fifteen were referred for treatment. There were thirty-seven other aural cases, mostly accumulation of wax in the meatus. The worst of these were referred for treatment. There were few cases of deafness discovered.

In most of the schools it is difficult to carry out tests for deafness owing to unavoidable causes. It appeared that a certain number of so-called cases of deafness are really inattention. Others are due to adenoids, and when this is the case, operative treatment is advised.



EXTERNAL EYE DISEASE.

There was rather more External Eye Disease found than in some recent years. Six cases of blepharitis came to light and these were all referred for treatment. No case of keratitis was seen, and it was not found necessary to refer any of this class of case to the School Oculist.

DEFECTIVE VISION AND SQUINT.

The vision of 929 children was tested at the routine medical inspections, that is all children of over seven, except fifteen who were unable or refused to read the types. Of all children, infants included, examined, twenty-one were found to be suffering from squint in a greater or lesser degree. Of these, sixteen were referred to the School Oculist for treatment and the others, mostly very slight cases, referred for observation.

Of the 929 older children, 682 were found to have normal vision in both eyes, and 247 to have some visual defect in one eye or both. The percentage with normal vision was rather smaller than in the previous year, namely, 73.4 per cent. compared with 76.2 per cent. Of the 247 children with some visual defect, considerably more than half had defects so slight that correction was not considered necessary. As a rule, treatment was advised when the vision is worse than 6/12 in one eye. That is a child with vision 6/12 in both eyes was not referred for treatment, while one with 6/12 in one eye and 6/18 in the other, or 6/6 in one eye and 6/18 in the other, was referred for treatment. There were, of course, many exceptions to this rule. Children suffering from chronic headache in school being nearly always referred for refraction even if the visual acuity appeared to be normal to the types.

In the 247 children with subnormal vision of any degree, 75.7 per cent. of the individual eyes had an acuity of 6/12 or better, and 24.3 per cent. one of 6/18 or worse.

One hundred children were referred for treatment, a rather smaller number than last year.

Table V gives a summary of the vision test at Routine Medical Inspections:—

TABLE V-VISION TESTING.

	Per Cent.
Number examined	929
With Normal Vision	682 73.4
With Subnormal Vision	247 26.6
Vision 6/6 Right	45 18.2
Left	36 14.6
Vision 6/9 Right	89 36.0
Left	101 40.9
Vision 6/12 Right	54 21.9
Left	49 20.0
Vision 6/18 Right	38 15.4
Left	38 15.4
Vision 6/24 Right	9 3.6
Left	12 4.9
Vision 6/36 Right	8 3.2
Left	8 3.2
Vision 6/60 Right	14
Left	14
Vision 6/0 Right	3 1.2
Left	28
With Glasses	54 20.0
Not Tested	15 16.1
Number of children referred for	10 11 1011
treatment	100
transfer in the state of the st	200

DENTAL DEFECTS.

At the Routine Inspection the teeth of each child are examined, but without mirror and probe, and consequently many carious teeth are missed which would be detected if more thoroughly searched for by a dental surgeon.

In spite of this, however, no fewer than 1,162 children had one or more decayed teeth, leaving a residue of 177 with apparently sound teeth, a percentage of 13.2, a rather higher percentage than last year.

In 430 children carious teeth was the only defect found; a percentage of 32.1 compared with 39.6 per cent. in 1931 and 30.6 in 1930.

The figures below show the number of children with sound teeth, with one to three carious, and with four or more decayed teeth.

(Col)

Condition of teeth found at Routine Examinations:

All Teeth sound	177	. 13.21	per ce	ent
Carious (1 to 3)	682	. 50.93		
Carious (4 or more)	480	. 35.84	.,	

The reduction of the number of children with perfect teeth is disappointing, but in spite of this there does seem to be a small but definite improvement in the condition of the children's teeth. In 1921, 46.8 per cent. of all children inspected had four or more carious teeth, while in 1922 the percentage was 41.8. In the year under review the percentage of children with this amount of dental decay had dropped to 35.84 per cent., and in the previous year it was 35.7 per cent. Thus while there seems to be no improvement at all in the number of children with perfect dentures, those with definitely bad mouths seem to be decreasing in number. I have noticed for some time that the numbers of really foul and septic mouths are considerably less. The school dentist's report will be found on page 33

CRIPPLING DEFECTS.

No cases of Epilepsy were met with during the year, and there were three cases of Chorea, which were referred for treatment. There were no other cases of severe crippling defects. The cases of Rickets met with mostly affected the chest. There are known to be eight Epileptics among the school children in the district.

MENTAL DEFECTIVES.

No special investigation was made into this form of defect during the year and no cases were notified to the Local Control Authority. At the present time there are six children in the district who have been so notified and in addition there are thirty-one feeble-minded children in the district, of which twenty-four are attending public elementary schools.

During the summer I made an investigation into the mental capacity of twenty-one children at South Parade Modern School. These children were reported to me as being definitely not mentally deficient, but more or less badly retarded. The investigation was an interesting one and confirmed in a striking manner the estimation formed by the headmaster.

The following is a detailed report of the examination:—

Twenty-one children were examined during June, of which all but two are in Form Ic, which consists of twenty-seven children in all. The other two children are in Forms Ib and IIb.

The chronological ages of the children examined varied from 11.7 years to 13.6 years, the average age being 12.6. Twelve of the children were between twelve and thirteen.

The tests used were those in Prof. Cyril Burt's manual, and included tests in reading, arithmetic and general intelligence, the tests in the latter being based on those of Binet and Simon. In each case the tests are arranged in groups, which should be passed by normal children of the age to which each group applies.

READING.—This test consists of groups of words, each group progressing in difficulty, and beginning with words that a normal child of four would be expected to read.

The ability to read varied considerably from almost total inability to read at all, to one hundred words, which were read by W.P., and ninety-seven by H.P. Three children, namely, the two just mentioned and G.S., were not retarded at all in reading, while at the other end of the scale, D.B. was retarded 4.8 years, H.C., 4.5 years, M.J., 4.3 years and E.Y., 4.1 years. In all, eleven children, or exactly half, were retarded less than two years in reading.

The average chronological age of all children examined was 12.6 years, and the average reading age 9.9 years, thus giving a mean retardation of 2.7 years in reading.

ARITHMETIC.—These tests are arranged in groups of ten for each year of age, each group having been proved to be within the capacity of normal children of the age to which it is assigned.

The findings in this series of tests were very much worse than in the case of reading. The average arithmetic age of the twenty-one children examined was 7.2 years, giving a mean retardation of 5.4 years, or exactly double of that in reading.

The arithmetic ages varied from 5.5 years in the case of E.Y., and 6.4, V.M., with nine more under seven to 9.4 in the case of I.J., and 8.8. S.S., together with four more of eight and over. The minimum retardation in arithmetic was 2.6 years (I.J.), the next best being 3.2 years (R.H.). At the other end of the scale were W.P., 6.9 years, G.C., 6.8 years, and five others retarded over six years.

The arithmetic of these children can only be described as hopeless. Though the youngest child was nearly twelve, it was useless attempting nine-year-old tests with ten of the twenty-two. Of the other twelve, two failed in all the nine-year-old tests and two more only succeeded in one test each. The remaining eight succeeded in forty tests or an average of five each. It was only found possible to apply the ten-year-old test to seven of the children, and of these, two failed at every one and three more only succeeded at one test each. One of the remainder answered three of this group correctly, and one was successful in five. Of those tried with eleven-year-old tests, nobody was successful in answering anything.

One boy, E.Y., could manage nothing beyond the six-year-old group, while I.J. and S.S. answered all the eight-year-old-tests, the latter being successful in eight of the ten questions in the nine-year-old group, but quite incapable of dealing with anything in the next group.

One particularly easy question seemed to present insuperable difficulties. It is No. 4 in the eight-year-old group: "I have twenty-two farthings in a bag. How many pennies is that worth?" Only four succeeded in answering this correctly. Many of the others did not appear to know the meaning of the question and those who did attempt it made wild shots ranging from three-halfpence to four-and-six.

It might be suggested that this extremely low standard in arithmetic might be due to faulty methods when younger and insufficient grounding in first principles, but this is entirely ruled out by the fact that these twenty-one children have been at at least fifteen different schools, infant and junior.

INTELLIGENCE TESTS.—These tests, taken from Burt's manual and mostly adapted from Binet and Simon's original tests are, like the reading and arithmetic tests, arranged in groups, each of which has been found to be within the capacity of normal children of the age to which each group is assigned. The mental age is calculated from the number of tests successfully answered according to a table given in the manual, and the Intelligence Quotient is obtained by multiplying the mental age by one hundred and dividing by the chronological age.

For the purpose of classification I have taken a child with an IQ of 95 or over to be normal, of 85 to 95 to be slightly retarded, of 75 to 85 to be badly retarded, of 65 to 75 to be a borderline case, and of under 65 to be mentally deficient.

These values are quite tentative, so far as I know there is no definite ruling as to where retardation ends and mental deficiency begins, though obviously a child with an IQ of 40 is mentally deficient, and one with one of 85 is not.

The mental ages ranged from 7.8 in the case of T.B., together with three others of under nine to 12.5, E.B., 11.7, I.J. and L.R., and three others of 11 and over.

The lowest intelligence quotient was D.B., with 67, and T.B., with 65. On the other hand L.R., E.B. and L.W. all had intelligence quotients of over ninety.

As will be gathered from the above, the general intelligence of the children was far in advance of their ability in arithmetic. As a matter of fact the mean retardation in intelligence was practically the same as that in reading, and consequently half of that in arithmetic.

Five children were unable to answer any of the eleven-year-old-tests, four were only successful in one test, and four more in two tests. The other eight were successful twenty-nine times, or in 3.6 tests each. Altogether the twenty-one children were successful 41 times in the eleven-year-old tests or in 39 per cent.

Thirteen children were successful in answering one or more of the twelve-year-old tests, though only one, M.B., was successful in all three. In all the thirteen children made twenty correct answers or 1.5 each.

Two children were successful in both the thirteen-yearold tests and four more in one of them, while one girl, E.B., was successful in a fourteen-year-old test, namely the memorising of two sentences containing twenty-seven syllables.

There are in all twenty-one tests for the ages eight to twelve. These tests can be re-grouped into the following categories—Tests for Memory, for General Knowledge, for Reasoning, for Power of Expression and for Reasoning and Expression combined.

The following table shows the result of this grouping:—

MEMORY. 5 tests.

No.	41.	18	successes	• • •	3	failures
	44.	16	,,		5	,,
	48.	21	,,		0	,,
	51.	6	,,		15	,,
	52.	7	,,		14	,,



GENERAL KNOWLEDGE. 5 tests.

No.	36.	18	successes	• • •	3	failures
	39.	19	,,	• • •	2	,,
	40.	20	,,	• • •	1	,,
	42.	20	,,	• • •	1	,,
	43.	21	,,		0	,,
	R	EAS	SONING.	4 te	sts.	
No.	38.	20	successes	• • •	1	failure
	46.	16	,,		5	failures
	54.	2	,,	• • •	19	,,
	55.	9			12	

POWER OF EXPRESSION. 3 tests.

No.	45.	14	successes	•••	7	failures
	47.	9	,,	• • •'	12	,,
	53.	6	,,	• • •	15	,,

REASONING AND POWER OF EXPRESSION COMBINED. 4 tests.

No.	37.	20	successes	• • •	1	failure
	49.	11	,,	• • •	10	failures
	50.	11	,,		10	,,
	56.	9	,,	• • •	12	,,

Summarising these results, there were

68	successes	out	of	105 Memory tests	65%
98	,,	,,	,,	105 General Knowledge tests	93%
47	,,	,,	,,	84 Reasoning tests	56%
29	,,	,,	,,	63 Power of Expression tests	46%
51	,,	,,	,,	84 Reasoning and Expression	
				combined	61%

GENERAL CONCLUSIONS.

From the results obtained at this investigation, I do not think that any one of the children whom I examined could be expected to keep up with ordinary class work in arithmetic, the smallest amount of retardation in any one of them being just over two and a half years. So far as general intelligence goes, it would seem that the first nine on the classified list could take their place in an ordinary school with some fair prospect of deriving a reasonable amount of benefit therefrom. But of these nine, three are so retarded in their reading that they would be bound to be considerably handicapped in an ordinary school. This leaves six out of the twenty-one children

attendance at an ordinary school, always provided that they were segregated from the others for arithmetic.

I should not at the moment class any of the children that I examined as Mental Deficients, but, were suitable accommodation available, I should suggest that T.B. and D.B. should be re-examined in a year's time. These two are very low border-line cases, and probably by then would be so far retarded as to bring them into the Mental Deficient category.

Table VI.—CLASSIFICATION OF MENTAL CONDITION OF THE CHILDREN EXAMINED.

Together with Intelligence Quotient of each and the number of tests passed in each category.

				Tests	Passe	d in	
Class	Name	IQ	M	GK	R	PE	RPE
	No. of Tests		5	5	4	3	4
Normal IQ 95	I. J E. B	05	4 4	5 5	2 3	3 3	4 4
Slightly Retarded IQ 85-95	M. B	87 85 88 91 87	4 4 3 5 3 3 4	5 4 5 5 5 5 5	3 2 2 3 3 2 3	2 0 1 1 3 2 3	4 4 3 3 4 4 4 3
Badly Ret a rded IQ 7 5-85	E. S	82 78 80	3 3 4 2 4 4	5 4 5 5 5 5	2 2 3 4 2 3	0 1 3 2 2 1	3 2 1 1 1 3
Borderline IQ 65-75	D. B M. J T. B H. P E. Y H. C	71	3 2 1 3 1 3	5 5 2 5 4 4	1 1 2 1 2	0 0 1 1 0 0	1 1 1 1 1 3

IQ—Intelligence Quotient. GK—General Knowledge Tests.

M—Memory Tests. R—Reasoning Tests.

PE—Power of Expression Tests.
RPE—Reasoning and Power of Expression,

Table VII.—SUMMARY OF FINDINGS EXAMINATION OF CERTAIN RETARDED CHILDREN.

Child Class		Chr.	Ag R.	ges A.	М.	ArchiR.	IQ		
		CIII.	17.	11.	11/1.	1	Α.	<u>M.</u>	1
D.B, E.S M.J T.B V.M M.B W.P H.P R.H E.Y S.K F.B G.S I.J S.S L.R	lc l	12·4 13·2 12·0 12·1 11·9 13·3 13·6 13·2 11·7 12·2 12·8 12·1 12·0 12·0 12·2 12.6	7.6 10.2 7.7 7.0 9.1 12.0 14.0 13.7 8.4 8.1 12.1 10.9 13.0 8.6 9.7 11.4	7·5 6·7 6·5 6·9 6·4 7·1 6·9 8·5 5·5 8·7 7·8 8·3 9·4 8·8	8·2 10·0 8·7 7·8 9·7 11·3 10·6 9·7 10·2 10·2 10·2 11·7 10·8 11·7	4·8 3·0 4·3 5·1 2·8 1·3 nil nil 3·3 4·1 0·7 1·2 nil 3·4 2·5 1·2	4·9 6·5 5·5 5·5 6·9 6·3 3·7 4·1 4·3 3·7 2·6 4·6	4·2 3·2 3·3 4·3 2·2 2·0 3·5 1·5 3·5 1·9 1·8 0·5 1·4 0·9	67. 75.7 73. 65. 82. 85. 78. 71. 80. 84. 85. 97. 88.
E.B	lċ	13.1	11.3	7.9	12.5	1.8	5.2	0.6	95.
K.E	lc	12.4	11.5	6·7 6·7	10.8	0.9	5.7	1.6 1.1	87.
L.W	lc 11b	12·1 13·0	11·1 8·5	6.5	9.3	1.0 4.5	5·4 6·5	3.7	91· 72·
H.C	lb	13.3	11.9	6.5	11.0	1.4	6.8	2.3	83.
G.C	10	10.0	11 3	0.5	110	1 4	0 0	40	00
MEANS		12.6	9.9	7.2	10.0	2.7	5·4	2.6	79.4

Chr.—Chronological.

R—Reading. A—Arithmetic.

M—Mental.

IQ—Intelligence Quotient.

HEIGHTS AND WEIGHTS.

All children are weighed and measured at the time of examination. The results which are recorded in Table VIII are much in accordance with previous years. In the main age groups, namely, 4, 5, 8 and 12, the only group showing a deficiency compared with the average, 1920 to 1932, were the four-year-old girls.

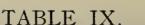
The column headed Ratio W/H records the average weight in pounds for each inch of height. Here the records for the year are mainly just above the average for thirteen years, except in the cases of the four-year-old boys and girls.

Table VIII.-HEIGHTS AND WEIGHTS.

		Ex	amined in	n 1932		Exa	umined in	1920 to	1932
	Age	Number	Height	Weight	Ratio W/H	Number	Height	Weight	Ratio W/H
BOYS	3 4 5 6 7 8 9 10 11 12 13	45 94 65 12 9 220 6 10 21 219 6	37·28 40·16 42·17 43·37 48·05 47·84 49·16 53·57 54·51 54·93 56·83	34·52 37·0 39·96 42·14 53·11 53·62 59·29 66·75 69·64 73·49 82·04	·92 ·95 ·97 1·1 1·12 1·21 1·24 1·28 1·33 1·44	451 1020 1316 300 181 2840 139 99 124 2679 169	38·15 39·33 41·91 43·43 46·25 47·24 49·9 50·65 53·85 54·29 55·12	33·71 36·67 39·4 43·54 47·42 52·57 55·97 63·47 69·11 72·24 77·65	*88 *93 *94 1.0 1.02 1.11 1.12 1.25 1.28 1.33 1.41
GIRLS	3 4 5 6 7 8 9 10 11 12 13	45 78 56 11 5 196 6 11 25 190 13	36.58 39.81 40.85 43.4 46.0 48.6 52.04 52.95 54.36 54.32 56.88	32·13 33·67 37·43 42·98 48·4 52·47 60·58 68·45 70·76 77·41 91·03	*88 *84 *91 *99 1.05 1.08 1.16 1.29 1.3 1.42 1.6	426 991 1230 298 169 2778 162 101 132 2589 231	36·59 38·84 40·87 43·13 45·68 48·03 49·0 51·45 54·21 55·48 56·22	32·19 35·44 36·99 41·58 46·47 50·78 54·7 64·08 70·92 74·03 80·05	*88 *91 *9 *96 1.02 1.06 1.11 1.24 1.31 1.33 1.42

VACCINATION.

Nine hundred and forty-nine children were found to be unvaccinated, a percentage of 70.87. This is 3.5 per cent. more than in 1931, which was actually the lowest percentage of unvaccinated children since 1922, when it was 61. This is a great improvement to the condition of affairs before the late outbreak of small-pox. In 1926 76.2 per cent. of all children examined were unprotected, and the percentage among the infants was no less than 82.1. Thus, not only are mere babies being vaccinated, but a considerable number of the older children have been protected since their previous examination.



Year	Number Examined	Number Unvaccinated	Per cent.
1920	771	400	51.9
1921	2020	1190	58.9
1922	1076	678	61.0
1923	1507	1047	69.4
1924	1782	1238	69.4
1925	2068	1497	72.4
1926	955	727	76.2
1927	1405	995	70.8
1928	1481	1014	68.4
1929	1466	1007	68.6
1930	1285	894	69.5
1931	1364	917	67.3
1932	1339	949	70.9

SPECIAL CASES.

At the Routine Examinations head teachers are invited to bring to the notice of the School Medical Officer any child who they think requires examination and treatment. The School Nurses also present children for inspection in whom they have found defects during their weekly visits to the school. Special cases are also seen at the School Clinic, being sent there by head teachers, nurses or parents. During the past year 360 children were seen in school as "Specials."

The defects found were as follows—

TABLE X.

	Referred	Referred
	for	for
	Observa-	
	tion	
Heart Disease	. 5	5
Deformities	. —	3
Defective Vision and Squint	64	70
Otitis Media		7
Deafness	3	5
Enlarged Tonsils and Adenoids	2	10
Uncleanliness		
Dental Defects		4
Blepharitis		1
Conjunctivitis		5
Other Diseases and Defects		84

TREATMENT.

Treatment is carried out partly at the School Clinic, partly by the Nurses in the schools at their weekly visits, and partly at special treatment clinics held daily during term time at Heaton Avenue School for the northern end of the district and at the School Clinic for the southern end.

Owing to the scattered nature of the district, a visit to the Clinic often entails the loss of an entire half-day in school. Certain defects, such as errors of refraction, enlarged tonsils and adenoids and dental cases can obviously only be dealt with at the Clinic, but the bulk of the minor ailments, most skin diseases and slight injuries are dealt with in the schools, only an occasional visit to the Clinic being necessary when the case is not responding to treatment. This method of dealing with defects saves thousands of hours of school time during the year, besides ensuring prompt and certain attention in all cases.

All cases, except such defects as warts, sores, boils and minor injuries, which in themselves make up a large proportion of the total cases treated, are referred to the School Medical Officer, either at the Clinic or at his periodical visits to the schools.

The following Table gives the defects dealt with at the School Clinic—

TABLE XI.

Ringworm, Scalp	2
Ringworm, Skin	1
Impetigo	7
	G
Scabies	6
Other Skin Diseases	11
External Eye Disease	6
Defective Vision and Squint	112
Otitis Media	4
Other Ear Disease	5
Enlarged Tonsils and Adenoids	14
Other Throat and Nose Disease	12
Miscellaneous Defects	19
Making a total of	199

Four hundred and ninety-two attendances were made at the Medical Clinic, and one thousand five hundred and fifteen at the Dental Clinic, making a total of two thousand and seven attendances at the School Clinic.

Table XII shows the number of children from each school who received treatment.

TABLE XII.

				No. of	
				Children	Attending
SCHOOL				Receiving	Dental
				Treatment	Clinic
Millbridge Council •	• •	• • •	• • •	56	172
Millbridge National .	• • •	• • •	• • •	31	113
Hightown National ar		wler	Hill	20	136
Littletown Council ·	• •	• • •	• • •	37	103
Gomersal National .	• •	• • •	• • •	34	127
Gomersal Council	• •	• • •	•••	43	155
Moorend C.E	• •			32	51
Roberttown Senior, Ju	inior a	nd In	fants	22	116
Norristhorpe Council.		• • •	• • •	42	162
Oakenshaw Council.	••	• • •	•••	9	21
Scholes National .	• •	• • •	• • •	20	89
	• •	• • •	• • •	98	45
Whitcliffe Road Cour	ncil	• • •	• • •	71	29
St. Luke's C.E.	• •	• • •	• • •	7	30
Hightown Council .	• •	• • •	• • •	27	136
South Parade Modern		• • •	• • •	28	54

One hundred and eighteen Special Treatment Clinics were held during the year at Heaton Avenue School, and the School Clinic in Valley Road for the treatment of children suffering from defects requiring more constant supervision than could be given by the Nurses' weekly visits to the schools. At these the total number of attendances was three hundred and fifty-four.

ERRORS OF REFRACTION.

The following are the particulars of the cases of Errors of Refraction dealt with at the School Clinic— 1930 Cases Completed Nil Old Cases Re-Examined 11 Cases Referred for Treatment— Routine 100 72 Specials Nil Treatment Abandoned Glasses not required 28 Nil Under Treatment on Dec. 31st, 1932 Prescriptions given after Retinoscopy 72 25 Prescriptions given without Retinoscopy Glasses obtained after Treatment at Clinic 94 95 Retinoscopies Glasses obtained from Hospital or Private 4 Practitioner Glasses obtained elsewhere 4 Total Children obtaining Glasses 102 Total Children seeking Treatment 155 101 Cases seen by School Oculist

The vision of all children refracted in 1931 was tested during the year, and those with an apparently unsatisfactory corrective were referred for further refraction.

Seven pairs of spectacles were provided by the Committee without charge in necessitous cases.

Mr. A. McKie Reid, of Liverpool, attended on ten occasions during the year. One hundred children were referred to him and made 122 attendances.

ENLARGED TONSILS AND ADENOIDS.

Fifteen operations for Enlarged Tonsils and Adenoids were performed by Dr. Unthank, of Cleckheaton, during the year. The particulars of these operations were—

			Total.
Enlarged Tonsils	$\dot{2}$	1	3
Adenoids			
Enlarged Tonsils and Adenoids	9	2	11

In fifty-eight cases, operations for throat and nose defects were performed on elementary school children by private

practitioners or in hospital.

During the last two or three years the number of these cases has increased very materially with the result that the number of cases of enlarged tonsils found at Routine Medical Inspections to need treatment, and consequently the number of cases operated on at the Clinic has been considerably reduced. The number of slightly enlarged tonsils, needing no treatment, remains about the same.

RINGWORM.

Two cases of Ringworm of the Scalp were dealt with at the Clinic during the year. One was an old case and one a new one. Both cases were cured and returned to school.

DUTIES OF SCHOOL NURSES.

There are four half-time School Nurses in Spenborough who also act as Health Visitors, the equivalent of two whole-time nurses. Seeing that there are eighteen schools and an area of 5,000 acres, this cannot be considered excessive.

The district is divided into four areas, each Nurse being allotted one area, both as School Nurse and Health Visitor. The Nurses attend with the School Medical Officer at the Routine Examinations and with the Dentist at the Dental Inspections. She weighs and measures the children to be examined, and tests the vision with the types of the children in the upper schools before the examination.

Nurses are in attendance at the General Clinics and at the Throat and Nose Clinic, but it is not considered necessary for one to attend for refractions.

Each Nurse visits each of her schools once weekly during term time for the treatment of minor ailments. At this time she obtains information with regard to children absent for infectious disease and with regard to any exceptional children. 683 visits were made during the year.

She visits the houses when required to enquire into alleged cases of infectious disease where no doctor is in attendance, and also to follow up certain defectives who have not responded to notices to attend the Clinic for treatment, or to obtain any other information required. The Nurses paid 343 visits during the year for these purposes.

Three times in each year special visits are made to schools for head inspections. All children in school on the day of inspection are examined and reported on, and dirty children are re-inspected about a fortnight later.

TREATMENT BY NURSES IN THE SCHOOLS

The following is a summary of the treatments carried out by the School Nurses, the figures indicating the actual number of children affected—

Number treated for-

Sores and other Diseases of Skin	636
Minor Eye Defects	142
Minor Ear Defects	225
Minor Injuries	825
Other Defects	412
Total number of cases dealt with by School	
Nurses	2240

The majority of cases other than sores and minor injuries were seen by myself, either at the Clinic, at the Routine Examinations, or as "Specials," when directions were given the Nurse as to treatment.

The large number of sores treated in the school accounts largely for the comparatively few cases found at Routine medical inspection.

The total number of treatments given by the Nurses in the schools during the year was 11,681, and, in addition, advice was given in 163 cases. The number of visits paid by the Nurses to the schools for various purposes was 892.

DENTAL SERVICE.

The following is the report of the School Dentist:—

Health Office,

Spenborough.

31st December, 1932.

To the School Medical Officer, Dear Sir,

I have pleasure in submitting to you my report for 1932.

The amount of time devoted to treatment relative to inspection is considerably greater this year owing to the fact that several schools inspected in 1931 were not treated until 1932. The general condition of the teeth is improved except in the very young child and in those who have persistently refused treatment in the past.

The aim has been to carry out complete treatment, followed by re-inspection and, if necessary, re-treatment annually. It has been usual to treat irregularities and overcrowding of the permanent dentition by judicious extraction.

As in the previous year, the age-groups inspected were from 6 years to 13 years inclusive. In most cases, children were accompanied by parents when attending the clinic for treatment.

Yours faithfully,

MARION M. THOM,

School Dental Officer.

841

TABLE X.

Number of children inspected—		
Age Groups 5 6 7 8 9 10 11	12	13
9 190 242 232 251 248 233	264	246
Total 1897.		
Number of half-days occupied—		
(a) At the Clinic	172	
(b) At Inspections	13	
	185	
Average number inspected each half-day	146	
Number requiring treatment	1523	
Number absent when Inspections made	199	
Number of schools inspected	12	
Number of sound mouths	367	
Special Cases	8	
Number actually treated	1130	
Re-treated as result of periodical examination	Nil	
Attendances made by children	1524	
Fillings (a) Temporary teeth		
(b) Permanent teeth 756		

Γotal.....

Extractions (a) Temporary teeth 1756 (b) Permanent teeth 254 Total	:
General Anæsthetics Other operations—	
(a) Temporary teeth	
(b) Permanent teeth 128	
Total ——	134

INFECTIOUS DISEASE AMONGST SCHOOL CHILDREN.

The year 1932 will be remembered as being the worst year for epidemic disease amongst school children since the district of Spenborough came into existence.

In all 1,083 cases of infectious disease were either notified or were reported by the head teachers. This is 367 more than in 1929, which had previously been the worst year on record, the increase being no less than fifty-one per cent. The average number of cases annually during the previous ten years was 566, so there were actually nearly double the usual number of cases.

It will be remembered that during the autumn of 1931 there was a very extensive epidemic of mumps, and this continued for the first two or three months of the year, dying away during March. But at the end of February an epidemic of chicken-pox broke out, only slightly less extensive than that of mumps. This lasted until June and was accompanied by an outbreak of measles during the spring. The incidence of this epidemic of measles was not heavy, as measles epidemics go, and tended to be somewhat localised so far as the Schools were concerned. Shortly before the summer holidays, measles and chicken-pox having almost completely abated, whooping cough broke out in certain districts and continued through the summer holidays into the autumn term. Finally, shortly after the schools re-assembled a very extensive, though mild, epidemic of scarlet fever began and continued unabated until the end of the year. Thus during the entire twelve months the schools were never free from epidemics of infectious disease of one sort or another.

The one bright spot in the story of infectious disease in the schools is that in spite of the huge number of cases there was not one death as a result of any of them.

The distribution of the cases was very irregular. In comparison with the number of children on roll, St. Luke's was most heavily attacked, followed by Whitcliffe Road, Mill-

Roberttown Senior and Infants. All these Schools had one child in three or more attacked. On the other hand, Hightown National Mixed, South Parade and Oakenshaw had one in ten taken ill. It will, of course, be noted that these Schools have no infants departments.

There is also a great disparity in adjoining Schools. While Gomersal Council School had 29.3 per cent. of the children attacked, the figure for the National School was only 12.5, but in considering these figures it is very curious to note that in respect of scarlet fever, the position was entirely reversed, there having been eleven cases at the National School as against only two at the Council School.

Exactly the same curious record applies to the Robert-town Schools. In the Council (Senior and Infants) School, the attack rate for all diseases was 33.9 per cent., and at the National (Junior) School it was only 18.1 percent. But the latter school had nine cases of scarlet fever and the Council School none at all. The attack rate at Millbridge Council was 13 per cent, while at Millbridge National it was 37.7 per cent.; but there the cases of scarlet fever were more equally divided, namely 21 and 29 respectively. There was little difference in the general incidence of these diseases in the three divisions of the district, though Liversedge, particularly the area served by the two Millbridge Schools, had more scarlet fever than other parts of the district.

SCARLET FEVER.

One hundred and thirty-nine cases of scarlet fever occurred amongst elementary school children during the year. Of these, nine cases were in children living outside Spenborough but attending schools in the district. Twenty-two of the cases were notified between January 1st and August 31st, and 117 during the last four months of the year. The largest numbers that had ever previously been notified in a year was 95 in 1923 and 80 in 1922 and 1928. The average number of school children attacked during the previous twelve years was sixty-five. Hence the number of cases in 1932 was just over double the average.

Only two schools escaped infection, namely Scholes and Roberttown Council. There was one case only at Oakenshaw, two each at Moor End and Gomersal Council, and three at Littletown. On the other hand at Millbridge National, where there were more cases than at any other school, twenty-nine were attacked, and there were twenty-one cases at Millbridge Council, twenty at Whitcliffe Road, fourteen at Heaton Avenue and eleven at Gomersal National. No other School had more than nine cases.

	_e Dec. 22—31	2 1	D (
	Dec. 15—21	HH 20	2
	Dec. 8—14	1 2 3 1 31	11
	7—1 .59U	12 24	10
LS.	Nov. 24-30		63
00	ZZ—TI .voV	2 11	5
SCHOOLS).	91-01 .voV	H T 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	∞
	6—5 .voV	H H4	7
Z	S.voN-72.15O	4 H W C 4	17
DISTRIBUTION	0ct. 20—26	H 22 HH	00
T)	Oct. 13—19	H	9
RIB	Oct. 6—12	7 7 1 5	∞
IST	G.toO-62.tq92	23 14 17	4
0	Sept. 22—28	М	M
ER.	Sept. 15—21	20 11	9
FEVE	Sept. 8—I4	H	H
Ē	Sept. 1—7	H	
LET	:		
SCAF	:	Infants	:
Table XIII.—SCARLET	School		:
Table	LAST IN SCHOOL	Oakenshaw Council Scholes National Moorend C.E Whitcliffe Road Council Heaton Avenue Junior and South Parade Modern St. Luke's C.E Hightown Council Knowler Hill Council Knowler Hill Council Roberttown Council Roberttown Council Roberttown Council Roberttown Council Roberttown Council Captional Littletown Council Comersal Council Gomersal National Gomersal National	Totals
1			

While there can be no doubt that the Schools played a certain part in spreading infection, I do not think from the general run of the epidemic that school closure would have had much effect in stopping the spread of the disease. The onset appears to have been extremely rapid in many cases, for a large number of children appear to have been in school the day they were actually noticeably ill.

The type of the disease was for the most part very mild, particularly in the early stages of the epidemic.

DIPHTHERIA.

It is satisfactory to be able to report that Diphtheria showed a very marked reduction compared with the previous year, when twenty school children took the disease. The number of cases in the schools was only five, of which two were at Whiteliffe Road and one each at Heaton Avenue and each of the Gomersal Schools. There were no deaths.

MEASLES.

272 cases of measles occurred amongst school children, mostly in the spring. Hightown National and Roberttown National escaped entirely, but all other schools had cases. Scholes had by far the largest number of cases, namely, 59. There were 40 cases at Gomersal Council and 32 each at Whitcliffe Road and Millbridge Council. The only other schools with more than ten cases were St. Luke's, 28 cases, Millbridge National, 23 cases, and Roberttown Council, with 17 cases.

In three previous years only have there been more cases of measles in the schools than in 1932, namely 315 in 1922, 367 in 1925 and 298 cases in 1929.

WHOOPING COUGH.

Whooping cough was much more prevalent than usual, in fact more cases were reported from the schools than in any of the previous ten years. Nine schools were infected and 80 of the cases or nearly two-thirds occurred in Whitcliffe Road, 31 cases, Heaton Avenue, 26 cases, and Littletown, 23 cases.

Carlot State

CHICKEN POX.

Three hundred and fifty-seven cases of chicken pox occurred among school children during the year. This is by far the largest number ever occurring in any one year, the next largest being 210 in 1926. The average annual number of cases during the previous ten years was 122, so that in 1932 there were nearly three times the usual number of cases.

The epidemic occurred during March to June, reaching its height between Easter and Whitsun. There were cases in all schools except Oakenshaw and St. Luke's, but there were only two cases each at South Parade and Hightown National Mixed, three each at Scholes and Knowles Hill, four at Mill-bridge National and five at Millbridge Council. On the other hand there were sixty-two cases at Norristhorpe and fifty-eight at Gomersal Council (but only nine at the National School). There were forty cases at Whitcliffe Road and thirty-nine each at Heaton Avenue and Roberttown Council and thirty-five at Hightown Council.

With the exception of scarlet fever, chicken pox is the most persistent of the epidemic diseases in Spenborough; there have been only two years in the last eleven that less than 100 cases have occurred.

MUMPS.

The epidemic of the autumn of 1931 continued after the New Year. There were 176 cases, of which 147 occurred in four schools which had not been affected to any extent in the previous year. These were Millbridge National with 58 cases, Heaton Avenue with 40 cases, and St. Lukes' and Hightown National with 22 and 27 cases respectively. No other school had more than eight cases during the year and four escaped altogether.

OTHER DISEASES.

One case of enteric fever occurred at Roberttown Council and one case of German measles at Oakenhsaw. There was, I am glad to report, no case of small pox or cerebro-spinal fever.

Table XIV shows the distribution of infectious disease during the year, and Table XIII the distribution of scarlet fever during September to December.

All contacts with scarlet fever are excluded from school for a week, and with diphtheria for a fortnight. In the case of whooping cough, measles, German measles and chicken pox, if the contact is attending an infants' department he is excluded, but if in a mixed school he is not excluded if there is reason to believe he has had the disease.

1891 ni				**		~~					~~	~~	~~	,					
Percentage attacked	2 8	167	9.9	24:5	8.	1.8	4.5	5.5	f 90.9	202	3.6	13.8	3.9	4:5	2.8	6.4	39.7	40.0	13·1
Percentage of Children attacked	0.6	30.7	15.8	43.5	35.2	5.1	50.0	34.2	1.8	24.4	33.0	18·1	9.92	13 0	7.78	22.1	29.3	12.5	24.4
German Measles	1																		
sdunjų	∞	က	4	50	40	က	22	22					_	_	58	67	-	-	176
—————————————————————————————————————		က	18	40	39	67		35	C 1	က	39	12	65	20	4	26	58	6	357
gniqoodW AguoO			<u>∞</u>	31	56		13	19		က					9	23	-		132
Measles	2	59	က	32	41	r	28	<u>ت</u>		<u></u>	17			32	23	9	40	10	272
Eirəhthqi (I				22	-														5
Scarlet Fever	1a		7	20	14	က်	<u>ت</u>	2	-	က		9a	9	216	29	က	7	11a	139c
Enteric Fever											→								П
SCHOOL.	Oakenshaw Council	Scholes National	Moorend C.E	Whitcliffe Road Council	Heaton Avenue	South Parade	Luke's C.E	Hightown Council	Hightown National	Knowler Hill Council	Roberttown Senior & Infants	Roberttown Junior	Norristhorpe Council	Millbridge Council				Gomersal National	ALL SCHOOLS

TABLE XIV.-INFECTIOUS DISEASES IN SCHOOLS, 1932.

c 9 cases. b 6 cases. Cases living outside the Area: a 1 case.

INFECTIOUS DISEASE AMONGST SCHOOL CHILDREN. TABLE XV.

Year	Enteric Fever	Small Pox	Scarlet	Diphtheria	Measles	Whooping Cough	Chicken Pox	Mumps	German Measles	Yearly Totals
1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932	3 1 1	$egin{array}{c} 4 \\ 34 \\ 21 \end{array}$	56 56 80 95 22 37 23 39 80 64 55 57	31 30 8 5 3 1 20 4 3 8 9 20 5	315 215 174 367 37 244 47 298 62 22 272	92 36 53 79 101 21 33 116 58 34 132	173 21 132 120 210 126 109 116 170 38 357	12 158 196 43 136 276 7 8 3 433 176	68 8 2 1	87 86 680 530 580 647 527 710 283 715 387 606 1083

OPEN-AIR EDUCATION.

Spenborough is not provided with any open-air schools or class-rooms, but during the summer, whenever the weather permits, many classes are held in the play-grounds as far as this is possible.

In my opinion an open-air school is badly needed in the district. There are a large number of children, delicate and pre-tuberculous, some of whom have to be excluded for longer or shorter periods from the ordinary elementary schools, who would benefit very greatly from attending an open-air school. I am afraid that in a district such as Spenborough the cost of such a school would be heavy, as owing to the area of the district and the scattered population, some conveyance would be needed to take the children to and from the school. Nevertheless, I hope that such a school will come into existence in the near future.

School journeys are frequent, visits being made to places of historical interest and other interests in the neighbourhood.

PROVISION OF MEALS.

It was not found necessary to provide any meals for school children during the year.

In most of the schools arrangements are in force by which all children whose parents so desire can obtain a cup of milk or milk food at cost price. I consider this to be a great benefit and it will be interesting to note in future years the effect this scheme may have on the general nutrition of the children.

SCHOOL BATHS.

The elder children (those over eleven) attend the Cleckheaton and Heckmondwike Municipal Baths at regular times during the Summer months to receive instructions in swimming.

Children primarily go to the baths to learn to swim, and those who can already do so do not attend unless the number of learners in each school is not sufficient to make up the regular number.

Swimming is not compulsory, but all children over eleven are taught if their parents so desire, with the exception of those attending Oakenshaw school.

Certificates of proficiency are granted; second class to those who can swim 25 yards, and first class certificates to those who can swim 50 yards breast stroke and 25 yards on the back.

In addition, the Council give a free pass to those children who can swim a quarter of a mile. No child is allowed to compete for this pass until he or she reaches the age of thirteen, it being rightly considered that the exertion is too great for younger children. Ten such certificates were granted to boys and 25 to girls.

Accommodation is provided for 480 at Cleckheaton and 200 at Heckmondwike.

The following are the certificates of proficiency granted—

	1st	Class	2n	d Class
Boys Girls		35		58
Girls		56	• • •	103

CA

PHYSICAL TRAINING.

There is no organiser of physical training in the district, but the syllabus of the Board of Education is carried out by the teaching staff.

CO-OPERATION OF PARENTS.

The response of parents to attend the medical examination of their children showed a slight decline in the Mixed Departments and a slight increase in the Infant Schools compared with the previous year, which was the best on record.

64.7 per cent. of those invited were present at the examinations in the Upper Schools, and 92.3 per cent. in the Infant Schools. 73.1 per cent. in all attended compared with 76.1 per cent. in 1931.

Only six parents refused to allow their children to be examined.

This large attendance of parents is very gratifying, for it can only mean, after twelve years of medical inspection, that they find that they benefit by taking the trouble to come to school when requested. The attendances were—

In the Mixed Departments	64.7 per cent.
Infant Departments	
In the Cleckheaton Schools	73.8 per cent.
Liversedge Schools	71.3 per cent.
Gomersal Schools	77.1 per cent.
In all Schools	73.0 per cent.

TABLE XVI.

		Percentage	e Attended	
Year		l Schools		s Schools
	Invited	Áttended	Invited	Attended
1920	504	46.1	273	73.0
1921	1348	58.1	672	75.5
1922	958	60.8	118	77.0
1923	1135	60.0	472	79.0
1924	1094	61.3	689	83.16
1925	1406	59.5	718	83.5
1926	516	64.7	434	85.9
1927	900	64.2	479	88.5
1928	1067	62.04	410	90.73
1929	933	66.3	533	86.8
1930	863	66.9	422	84.8
1931	881	68.1	481	90.6
1932	901	64.7	392	92.3

CO-OPERATION OF TEACHERS.

Great assistance is obtained from the teachers in the various schools in bringing cases of defects to the notice of the Medical Officer or of the School Nurses. Many cases are thus discovered which would otherwise be missed.

At the Routine Medical Inspection the head teachers arrange the order in which the children are to be seen, and send up for inspection any special cases that they may consider require seeing.

Although the Nurses' weekly visits to the schools are primarily for the purpose of treatment of minor ailments found during the Medical Inspections, teachers are requested to bring to their notice at that time any case of defect not seen by the Medical Officer, whom they may think requires treatment.

When any child is excluded from school by the Medical Officer a duplicate of the certificate of exclusion is sent immediately to the head teacher of the school at which the child attends.

This certificate states the number of days for which the child is excluded, and the teacher is thus able to ensure that the child does not return to school too soon, and, on the other hand, is able to call the Attendance Officer's attention to any child who does not return to school on the expiration of the certificate.

CO-OPERATION OF ATTENDANCE OFFICERS.

On the exclusion from school of any child by the School Medical Officer, a duplicate of the certificate is sent immediately to the Education Office for the information of the Attendance Officers. By this means that department is kept aware of those children who are absent from school legitimately.

The Attendance Officers refer children who are absent from school for alleged illness to the School Medical Officer if they are doubtful of the genuineness of the case, and failing the production of a certificate from the usual medical attendant.

CO-OPERATION OF VOLUNTARY SOCIETIES.

The greatest assistance is rendered in many cases, otherwise difficult to deal with, by the National Society for the Prevention of Cruelty to Children. The officers of this Society are in a position to bring great pressure to bear on certain neglectful parents who will take no notice of anyone else. Fortunately, the number of such parents does not seem to be a large one in Spenborough. I have received during the year great assistance from the Society's Inspector in several cases.

A most valuable voluntary society exists in the Cleckheaton Cripples' Clinic. Here cases of deformity of all kinds are dealt with under the direction of Mr. James Phillips, of Bradford. A number of school children suffering from deformities, etc., have been referred to and treated at this institution during the year. During 1932 68 school children were treated at this institution, as well as 69 younger children. 9 school children and 23 younger children were referred by me to this institution.

BLIND, DEAF AND EPILEPTIC CHILDREN.

No special investigation has yet been undertaken for the grouping of this class of defects, beyond the school census, the findings of which are shown in Table III (B. of E.)

So far, no totally blind child has been discovered either at the Routine medical inspections or as "Special" Cases. One apparent deaf mute has been seen; he now attends a special school and is said to be doing well.

No definite scheme has yet been formulated for dealing with these cases.

NURSERY SCHOOLS, SECONDARY SCHOOLS AND CONTINUATION SCHOOLS.

There are no Nursery Schools in Spenborough, but children are admitted to the elementary schools on attaining their third birthday. The Education Authority carries on no work in connection with Secondary or Continuation Schools.

EMPLOYMENT OF CHILDREN.

The bye-laws regulating the employment of children and young persons came into force in July, 1920.

The bye-laws prohibit the employment of children (i.e., persons under 14 years of age) in the following occupations: as lather boy or girl; in kitchens or hotels, restaurants, etc; in public billiard rooms; on licensed premises; selling programmes or refreshments in theatres, etc; collecting or sorting rags and refuse; as attendants in shooting galleries and similar premises, or in any slaughter house.

No child under 12 years of age may be employed in any capacity whatever.

A child between 12 and 14 years of age may be employed:

(a) On school days between 5 p.m. and 7 p.m.

- (b) On week-days when school is not open, for not more than five hours between 9 a.m. and 7 p.m., and for not more than 16 hours in any week.
- (c) For the sale and delivery of milk and newspapers.

A child between 12 and 14 may be employed for these purposes for one hour, 7 to 8 p.m. on week-days, and for not more than two hours between 7 and 10 in the forenoon.

Before a child between 12 and 14 can receive a licence to carry on the occupation of delivering milk or newspapers, a certificate has to be obtained from the School Medical Officer to the effect that this work will not be prejudicial to his health or education.

During 1932 there were thirty-two applications for certificates, all from boys. This was the same number as in the previous year.

It was not found necessary to withhold a certificate in any case.

BOARD OF EDUCATION STATISTICAL TABLES.

TABLE I.

RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Entrants	• • •	• • •	• • •	406
Intermediates			• • •	417
Leavers	• • •	• • •	• • •	416
	Total	• • •		1239
Other Routine	Inspect	ions	• • •	100
	Total	• • •		1339

B.—OTHER INSPECTIONS.

Number of Special Inspections	• •	487
Number of Re-Inspections	•••	541
Total		1028

TABLE II.

(A)—RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION IN 1932.

DEFECT or DISEASE		ROU Number referred for Treat- ment	Number requiring to be kept under observation but not referred for Treatment	SPEO Number referred for Treat- ment	Number requiring to be kept under observation but not referred for Treatment
MALNUTRITION	•••	12	21		1
UNCLEANLINESS (see Table IV, Group V)					
SKIN—					
Ringworm: Scalp	•••		_	3	1
Ringworm: Body	• • •	1	-	1	_
Scabies	•••			6	
Impetigo	• • •	16	1	9	
Other Diseases (Non- Tuberculous)	•••	22	14	18	
EYE—					
Blepharitis	• • •	6		1	
Conjunctivitis	• • •	2	_	5	
Keratitis	• • •		_		
Corneal Opacities	• • •	3	mauma		
Defective Vision (exclude	ding				
Squint)	•••	100	147	63	63
Squint	• • •	16	5	11	5
Other Conditions	• • •	4	3	3	2
EAR—					
Defective Hearing			5	2	3
Otitis Media			2	7	
Other Ear Diseases	•••	19	18	4	
NOSE & THROAT—					
Enlarged Tonsils only	• • •	10	300	2	2
Adenoids only	• • •	2	3	2	1
Enlarged Tonsils and Add	enoid	ds 4	-	7	_
Other Conditions		17	14	9	

	ROU	TINE Number	SPE	CIALS Number
DEFECT or DISEASE	Number referred for Treat- ment	requiring to be kept under observation but not referred for Treatment	Number referred for Treat- ment	requiring to be kept under observation but not referred for Treatment
ENLARGED CERVICAL GLANDS (Non-Tuberculous)	1	8	1	3
DEFECTIVE SPEECH	. —	11	_	_
TEETH—Dental Diseases (see Table IV, Group IV)	. —	1162	_	
HEART & CIRCULATION	_			
Heart Disease: Organic	. 5	21	_	5
Heart Disease: Functional	_	1	1	
Anæmia	. 13	9	4	_
LUNGS—				
Bronchitis	. 2	_	_	
Other Non-T.B. Diseases	. 18	46	1	4
TUBERCULOSIS—				
Pulmonary:				
Definite	. —			1
Suspected	. —	_	_	
Non-Pulmonary:				
Glands	. —	1	_	1
Spine	. —		_	_
Hip	. —	_		1
Other Bones and Joints	. —		_	
Skin	. —	_		_
Other Forms	. —	_	_	
NERVOUS SYSTEM—				
Epilepsy	. —	1	_	_
Chorea	. 2	1	1	1
Other Conditions	. 6	16	1	
DEFORMITIES—				
Rickets	. 1	136	_	
Spinal Curvature	. —	_	_	
Other Forms	2	5	3	1
OTHER DEFECTS AND				
DISEASES	. 34	27	34	7 3

TABLE II.

(B)—NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTIONS TO REQUIRE TREATMENT (excluding Uncleanliness and Dental Diseases).

CODE GROUP	(Tumber of Children Inspected	No. Found to require Treatment	Percentage of Children found to require Treatment
Entrants	• • •	406	44	10.8
Intermediates	•••	417	7 8	18.7
Leavers	• • •	416	71	17.0
Total (Code Groups)	• • •	1239	193	15.5
Other Routine Inspection	ns	100	17	17.0

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

	IN	THE AREA.	
		Boys. Girls	. Total
1. BLIND (including partially blind).(a) Suitable for training in a School for the totally blind.		At Certified Schools for the Blind At Public Elementary Schools At other Institutions At no School or Institution	
(b) Suitable for training in a School for the partially blind.	1. 2. 3. 4.	At Certified Schools for the Blind or Partially Blind 0 1 At Public Elementary Schools 4 3 At other Institutions At no School or Institution	1 7
2. DEAF (including deaf and dumband partially deaf.)(a) Suitable for training in a School for the totally deaf or deaf and dumb.	1. 2. 3. 4.	At Certified Schools for the Deaf 1 0 At Public Elementary Schools 2 1 At other Institutions At no School or Institution	1 3
(b) Suitable for training in a School for the partially deaf.	1. 2. 3. 4.	At Certified Schools for the Deaf or Partially Deaf At Public Elementary Schools 0 2 At other Institutions At no School or Institution	2
3. MENTALLY DEFECTIVE (a) Feebleminded.	1. 2. 3. 4.	At Certified Schools for Mentally Defective Children 1 0 At Public Elementary Schools 14 9 At other Institutions At no School or Institution 3 4	1 23 7

		Boys, Girls, '	Total
4. EPILEPTICS.	1.	At Certified Schools for Epil-	z otar.
(a) Suffering from severe epilepsy.		eptics At Certified Residential Open	
	3.	Air Schools At Certified Day Open Air Schools	
			3
(b) Suffering from epi- lepsy which is not	1.	Schools 5 0	5
severe.	2.	At no School or Institution	
5. PHYSICALLY DEFECTIVE. (a) Active pulmonary	1.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or	
tuberculosis (including pleura and intrathoracic glands).	2.	the Board 0 1 At Certified Residential Open Air Schools	1
	3.4.	At Certified Day Open Air Schools At Public Elementary Schools	
	5. 6.	At other Institutions At no School or Institution	
(b) Quiescent or arrested pulmonary tuberculo- sis (including pleura and intrathoracic	1.	Schools approved by the Ministry of Health or	
glands).	2.3.	the Board At Certified Residential Open Air Schools	
	4.	Schools At Public Elementary Schools 3 1	4
	5. 6.	At other Institutions At no School or Institution	
(c) Tuberculosis of the peripheral glands.	1.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or	
	2.	the Board At Certified Residential Open Air Schools	
	3.	At Certified Day Open Air Schools	
	4. 5.	At Public Elementary Schools 1 4 At other Institutions	5
(d) Abdominal tubercu-	6. 1.	At no School or Institution 1 0 At Sanatoria or Sanatorium	1
losis.		Schools approved by the Ministry of Health or the Board 1 0	1
	2.	At Certified Residential Open Air Schools	
	3.	At Certified Day Open Air Schools	
	5.		1

		В	ays. G	ırls.	I otal.
(e) Tuberculosis of bones and joints (not including deformities due to old tuberculosis).	 2. 	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	1	1	2
	3.	At other Institutions	7		۵
	4.	At no School or Institution	1	2	3
(f) Tuberculosis of other organs (skin, etc.)	2.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board			
	3. 4.	At other Institutions At no School or Institution	0	1	1
g) Delicate Children, i.e., all children (except those included in other	1. 2.	At Certified Residential Cripple Schools At Certified Day Cripple			
groups) whose general health renders it desir-	3.	Schools At Certified Residential Open			
able that they should be specially selected	4.	Air Schools At Certified Day Open Air			
for admission to an Open Air School.	5.		19	14	33
	6. 7.	At other Institutions At no School or Institution	2	0	2
(h) Crippled Children (other than those with active Tuberculous	2.	At Certified Hospital Schools. At Certified Residential Cripple Schools			
disease) who are suffer- ing from a degree of crippling sufficiently	3.4.	At Certified Day Cripple Schools At Certified Residential Open			
severe to interfere materially with a	5.	Air Schools At Certified Day Open Air			
child's normal mode of life.	6.	Schools At Public Elementary Schools	6	4	10
	7. 8.	At other Institutions At no School or Institution	1	0	1
(i) Children with heart disease, i.e., children	1. 2.	At Certified Hospital Schools. At Certified Residential			
whose defect is so severe as to necessitate	3.	Cripple Schools At Certified Day Cripple			
the provision of educa- tional facilities other than those of the public	4.	Schools At Certified Residential Open Air Schools			
elementary school.	5.	At Certified Day Open Air Schools			
	6. 7.	At Public Elementary Schools At other Institutions	Ì	2	3
	8.	At no School or Institution	1	0	1

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1932.

Group I.-Minor Ailments

(excluding Uncleanliness, for which see Group V).

DISEASE or DEFECTS SKIN—	1	Number of De treatment Under the Authority's Scheme		
Ringworm-Scalp	• • •	3	_	3
Ringworm-Body	• • •	1	•	1
Scabi e s	• • •	6		6
Impetigo	• • •	131		131
Other skin disease	• • •	527	8	535
MINOR EYE DEFECTS (External and other, but excluding cases falling in Group II).	ing	150	1	151
MINOR EAR DEFECTS	• • •	236	_	236
MISCELLANEOUS (e.g., minor injuries, bruises, sor chilblains, etc.)	es,	1264	7	1271
Total	•••	2318	16	2334

TABLE IV.

Group II.—Defective Vision and Squint.

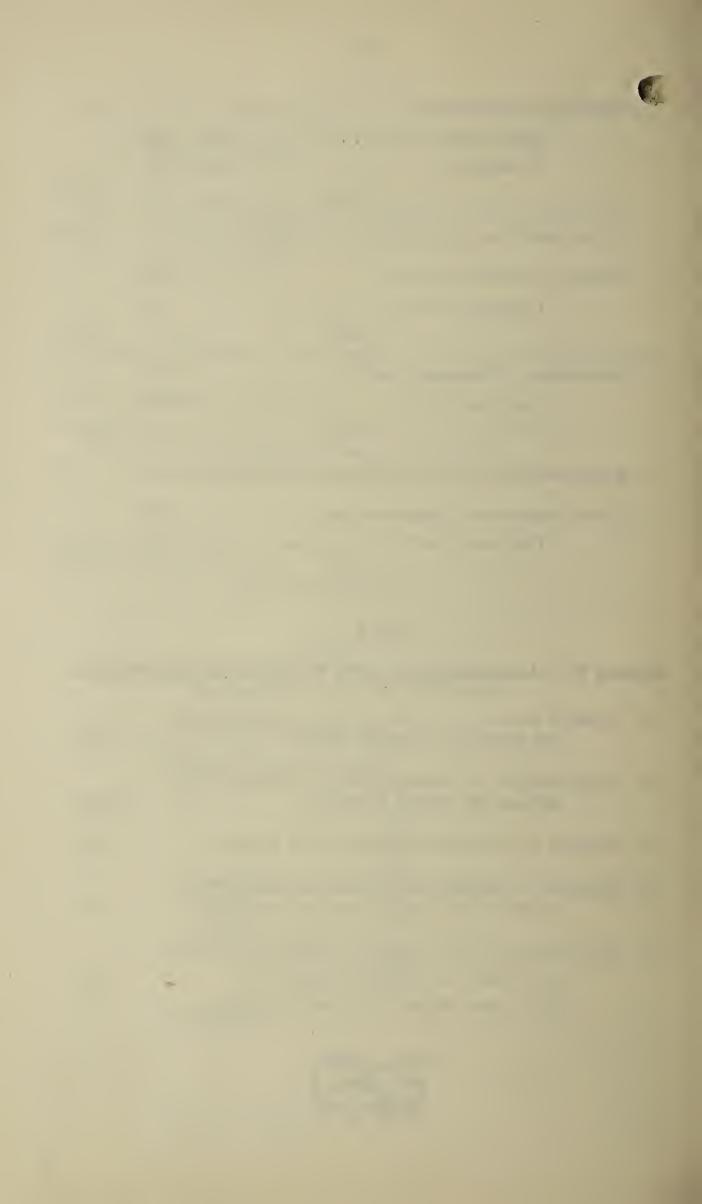
(excluding Minor Eye Defects treated as Minor Ailments-Group I).

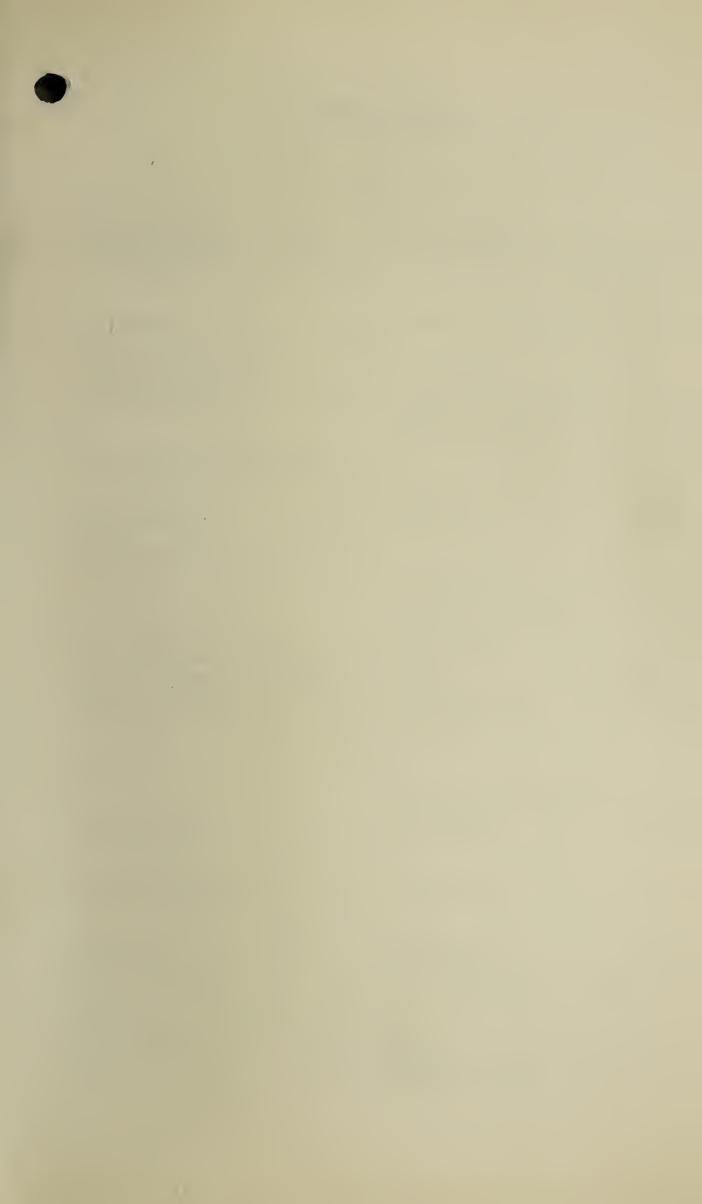
DEFECT or DISEASE	Under the	of Defects dea Submitted to Refraction by Private Practitioner or at hospital, apart from the Authority's Scheme	Other- wise	Total
Errors of Refraction (including Squint) (Operations for Squint excluded)	142	4	4	150
Other Defect or Disease of the Eyes (excluding those recorded in Group I)	1	gar Avannala.	deliner na	1
Total	143	4	4	151

Total number of children for whom spectacles were prescribed: (a) Under the Authority's Scheme 108 (b) Otherwise 8
Total number of children who obtained or received spectacles: (a) Under the Authority's Scheme 94 (b) Otherwise 8
TABLE IV.
Group III.—Treatment of Defects of Nose and Throat.
Received Operative Treatment—
Under the Authority's Scheme, in Clinic or Hospital 15 By Private Practitioner or Hospital, apart from
the Authority's Scheme 43
Received other forms of Treatment 13
Total number Treated 71
TABLE IV.
Group IV.—Dental Defects.
 Number of Children who were— (a) Inspected by the Dentist : Age No.
Routine Age Age Groups $ \begin{cases} 59 \\ 6190 \\ 7242 \\ 8232 \\ 9251 \\ 10248 \\ 11233 \\ 12264 \\ 13246 \end{cases} $ Total 1897
Specials 8
Grand Total 1905
(b) Found to require treatment 1523 (c) Actually treated 1130
(c) Actually treated 1130

2.	Half-days devoted to—					
	Inspection		• • •	• • •	13	
	Treatment	• • •	• • •	• • •	172	
		Total	•••	•••		185
3.	Attendances made by chil-	dren for t	reatm	ent	• • •	1524
4.	Fillings-Permanent teeth	ı	• • •	• • •	756	
	Temporary teeth	• • •	• • •	• • •	85	
		Total	• • •	•••		841
5,	Extractions—Permanent	teeth	• • •		254	
	Temporary teeth		• • •		1756	
		Total	• • •	• • •		2010
6.	Administrations of general	anæsthe	tics for	r extra	ctions	22
7.	Other operations—Perman	nent teeth	l	• • •	128	
	Temporary teeth	• • •	• • •	• • •	6	
		Total	• • •	•••		134
	TA	BLE IV.				
Gr	oup V.—Uncleanliness	and V	ermi	nous	Cond	itions.
(1)	Average number of visits	per scho	ol ma	de dui	ing	
()	the year by the Sch	_		• • •	•••	6.5
(2)	Total number of examin Schools by School			ren in	the	11,613
(3)	Number of individual chi	ldren foui	nd und	clean	• • •	634
(4)	Number of children clear made by the Local			<u> </u>		Nil.
(5)	No. of cases in which legal	•	_		en—	
	(a) Under the Edu				• • •	Nil.
	(b) Under School	Attendan	ce By	Plaws		









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